

Senior Advocacy Services

Amendment Number 3

to the Agreement to Provide

**SERVICES RELATED TO THE HEALTH INSURANCE COUNSELING AND
ADVOCACY PROGRAM (HICAP), THE MEDICARE IMPROVEMENTS FOR
PATIENTS AND PROVIDERS ACT (MIPPA), THE OMBUDSMAN PROGRAM, AND
ELDER ABUSE PREVENTION**

Funding Amount: **\$927,233.00**

Term: **07/01/2021 to 06/30/2022**

Agreement Number: AA-SAS-ADV-2122

This Amendment Number 3 ("Amendment") is by and between the County of Sonoma, a political subdivision of the State of California (hereinafter "County"), and Senior Advocacy Services, a California non-profit Corporation (hereinafter "Contractor").

As provided by Article 13.7, Merger, the parties hereby evidence their intent and desire to amend the Agreement. The parties mutually desire to amend said Agreement to make the following changes:

1. Revise Article 2, Payment, to increase the Agreement amount by Fifty-Two Thousand, Nine Hundred Thirty-Six Dollars (\$52,936.00), for a new total of Nine Hundred Twenty-Seven Thousand, Two Hundred Thirty-Three Dollars (\$927,233.00); and
2. Replace Exhibit A-1: Scope of Work and rename it Exhibit A-1: Scope of Work - Health Insurance Counseling & Advocacy Program (HICAP), and
3. Add Exhibit A-2.1: Scope of Work - Robotic Companion Pets Project, which is being funded by the Coronavirus Aid, Relief, and Economic Securities (CARES) Act; and
4. Add Exhibit A-3.1: Scope of Work - Elder Justice, which is being funded by the Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act; and
5. Add Exhibit A-4: Scope of Work: Medicare Improvements for Patients and Providers Act (MIPPA); and
6. In Exhibit B, Fiscal Provisions/Budgets:
 - a. Add Assistance Listing Program information to Section 7, Payment, for Elder Justice Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act and Coronavirus Aid, Relief, and Economic Security (CARES) Act;
 - b. Replace Section 8, Funding Allocation Summary;
 - c. Replace Section 9.1 for the line item budget for Title III B – Ombudsman;
 - d. Replace Section 9.2 for the line item budget for Title VII A – Ombudsman;
 - e. Replace Section 9.3 for the line item budget for Ombudsman Special Deposit;
 - f. Replace Section 9.6 for the line item budget for Title VII B – Elder Abuse Prevention; and

- g. Add Section 9.7 for the line item budget for the American Rescue Plan Ombudsman Augmentation.
- h. Note: Line item budgets are not required for Robotic Companion Pets Project nor for the Elder Justice Program.

RECITALS

WHEREAS, County and Contractor entered into that certain Agreement, dated July 1, 2021, for services related to the Health Insurance Counseling and Advocacy Program (HICAP), the Medicare Improvements for patients and Providers Act (MIPPA), the Ombudsman program, and Elder Abuse Prevention; and

WHEREAS, County and Contractor desire to amend the Agreement to revise the HICAP Scope of Work by creating a separate MIPPA Scope of Work; to add the Elder Justice Program and the Robotic Companion Pet Project; and to include additional funding to augment the Ombudsman and Elder Abuse Prevention programs;

NOW, THEREFORE, the parties hereto are desirous of modifying the Agreement in accordance with the terms and conditions set forth herein and hereto agree as follows:

SPECIFIC PROVISIONS

2. Payment.

For all services and incidental costs required hereunder, Contractor shall be paid on a cost reimbursement basis in accordance with the budget set forth in "Exhibit B: Fiscal Provisions/Budget" (hereinafter "Exhibit B"), attached hereto and incorporated herein by this reference. Contractor shall be paid an amount not to exceed Nine Hundred Twenty-Seven Thousand, Two Hundred Thirty-Three Dollars (\$927,233.00), without the prior written approval of County. Expenses not expressly authorized by the Agreement shall not be reimbursed.

Unless otherwise noted in this agreement, payments shall be made within the normal course of county business after presentation of an invoice in a form approved by the County for services performed. Payments shall be made only upon the satisfactory completion of the services as determined by the County.

Exhibit A: Scope of Work

This Exhibit A (Scopes of Work) includes the following, which are attached hereto and incorporated herein by this reference:

- 1. **Exhibit A-1:** Scope of Work – Health Insurance Counseling & Advocacy Program (HICAP)
- 2. **Exhibit A-2:** Scope of Work – Ombudsman Program
 - a. **Exhibit A-2.1:** Scope of Work – Robotic Companion Pets Project
- 3. **Exhibit A-3:** Scope of Work – Elder Abuse Prevention
 - a. **Exhibit A-3.1:** Scope of Work – Elder Justice
- 4. **Exhibit A-4:** Scope of Work – Medicare Improvements for Patients and Providers Act (MIPPA)

Exhibit A-1: Scope of Work

Health Insurance Counseling & Advocacy Program (HICAP)

TIME FRAME: 07/01/21 - 06/30/22

FUNDING: Special

GEOGRAPHY SERVICE AREA(S): Lake/Mendocino, Marin, Napa/Solano, & Sonoma

PROGRAM AREA: Health Insurance Counseling & Advocacy Program (HICAP)

1. Definitions.

- 1.1. *HICAP* means the Health Insurance Counseling and Advocacy Program as defined in State law, Welfare and Institutions Code, Section 9541.
- 1.2. *SHIP* means the State Health Insurance Assistance Program, as defined by the Centers for Medicare and Medicaid Services (CMS). This term may be used interchangeably with HICAP.
- 1.3. *Eligible Service Population* means:
 - a) Medicare Beneficiaries, including Medicare Beneficiaries by virtue of a disability, and those persons imminent of Medicare eligibility [W&I Code, Section 9541 (a) and (c) (2)].
 - b) The public at large for HICAP community education services [W&I Code, Section 9541, (c) (1), (4), (5), and (6)].

2. Program Requirements.

Sonoma County Area Agency on Aging is designated as lead agency for the Area Agency on Aging local Planning and Service Areas (PSA) for the North Bay HICAP contract through a Memorandum of Understanding with the following PSAs:

Lake/Mendocino – PSA 26
Marin – PSA 5
Napa/Solano – PSA 28
Sonoma – PSA 27

Under this Agreement, Contractor agrees to provide and abide by the following program requirements:

- 2.1. *Services* are provided only to the Eligible Service Population.
- 2.2. Plan and implement outreach efforts that target the eligible population, with special attention to rural residents who have no broadband internet or electronic media service, Spanish speakers, multi-cultural, and multi-lingual clientele. Publicity and outreach plans will include specific strategies for addressing challenges to reaching rural residents, minorities, and underserved groups.
- 2.3. Plan and implement outreach efforts that target the eligible population, with special attention to rural residents who have no broadband internet or electronic media service, Spanish speakers, multi-cultural, and multi-lingual clientele. Publicity and outreach plans will include specific strategies for addressing challenges to reaching rural residents, minorities, and underserved groups.

- 2.4 Implement staff training, policies, and hiring practices that: support and promote cultural competency and inclusivity; and demonstrate an ability to provide culturally and linguistically appropriate services to diverse populations such as Latinx, Black Indigenous People of Color (BIPOC), Lesbian Gay Bisexual Transgender Queer or Questions (LGBTQI+) and/or other minority and underserved groups.
- 2.5. *Management Capacity.* The Program Manager shall have the capacity to manage no less than 32 hours per week. The name of the Program Manager shall be submitted to the Sonoma County Area Agency on Aging within 30 days of initial employment.
- 2.6. *Program Manager Authority.* Provide that the Program Manager for HICAP has general oversight of HICAP services and sole authority to recommend persons for HICAP Counselor registration, to file industry complaints, and to refer HICAP clients to legal services.
- 2.7. *Notice of Operational Changes.* Provide timely notice to the Sonoma County Area Agency on Aging (AAA) of any changes to the program that could affect the operations of, or access to HICAP services including, but not limited to, program or project phone number changes, headquarters office address changes, or changes in the program status that could negatively affect HICAP.
- 2.8. *Registered Counselors.* Provide that all persons affiliated with the program and who are counseling, including paid personnel and volunteers, are trained and registered with the State as HICAP Counselors in accordance with law and regulation.
- 2.9. *Confidential Records.* All records containing confidential client information, including, but not limited to the "Intake/Counseling Form," shall be handled in a confidential manner, subject to the requirements for audits and monitoring. Confidential records shall be collected no less than annually from the field. Confidential records shall be maintained with the service provider until an audit has occurred and an audit resolution has been issued, unless authorized in writing by the Sonoma County Area Agency on Aging. After that period or authorization, confidential records shall be destroyed by shredding and disposed of in a manner that will maintain confidentiality.
- 2.10. Ensure statutory provisions of HICAP (W&I Code, Section 9541) are met and services provided in accordance with all applicable laws, regulations, and the HICAP Program Manual as issued by the California Department of Aging (CDA) and in any other subsequent program memos, provider bulletins or similar instructions issued during the term of this Agreement.
- 2.11. Maintain an up-to-date HICAP Program Manual and related CDA requirements so that all HICAP Counselors and responsible persons have ready access to standards, policies, and procedures. Additionally, all Counselors shall be provided the latest HICAP Counselor Handbook. [W&I Code, Section 9100 (c) & (d); Section 9541 (b)(1) & (2)].

- 2.12. Standard HICAP work week business hours, open to the public, shall be five days a week, Monday through Friday, at least 9 a.m. to 4 p.m., except holidays.
- 2.13. *Telephone* access by the public shall be during normal business hours, Monday through Friday, 9 a.m. through 4 p.m. In the event clients cannot receive personal assistance immediately, they shall be offered an opportunity to leave their name, a message, and return telephone number with an answering service or answering machine. Calls from clients leaving messages shall be returned within 48 hours, excluding weekends and holidays.
- 2.14. Provide a disclosure statement to counseling clients prior to counseling, as prescribed by CDA in the HICAP Program Manual [W&I Code, Section 9541 (f)(4)].
- 2.15. Provide a community education campaign designed to inform the public about Medicare, Medicare supplement and long-term care insurance options, Medicare Advantage plans, related health care plans, and insurance topics [W&I Code Section 9541(c)(1),(4),(5), &, (6)].
- 2.16. Refer instances of suspected misrepresentation in advertising or sales of services provided by Medicare, managed health care plans, and life and disability insurers and agents, in accordance with the HICAP Manual [W&I Code, Section 9541 (e)].
- 2.17. The Program Manager and/or designated representative shall attend all CDA required HICAP training sessions or conferences conducted during each fiscal year, in order to maintain program knowledge, efficiency, and competency [W&I Code Section 9541, (f)(7)].
- 2.18. Maintain a program data collection and reporting system as specified in Exhibit E of the State HICAP contract and ensure processes are in place to provide program evaluation and quality assurance, including but not limited to, client satisfaction surveys and questionnaires.
- 2.19. Meet or exceed the current Fiscal Year's State and Federal Performance Measures for HICAP for each of the PSAs listed in Section 2 of this Exhibit. Directions on how to access the current performance measures on the CDA website will be provided by Sonoma County Area Agency on Aging staff.
- 2.20. Meet the following minimum HICAP performance requirements per CDA guidance (HICAP: 1.1 & 1.2 are State PMs and 2.1-2.5 are Federal PMs):

Performance Measures	PSA 5	PSA 26	PSA 27	PSA 28
1.1 Clients Counseled	418	347	1,174	589
1.2 Public & Media Events	18	20	58	50
2.1 Client Contacts	1,472	911	2,922	1,744
2.2 Public & Media Outreach	1,022	422	2,213	1,631

Performance Measures	PSA 5	PSA 26	PSA 27	PSA 28
2.3 Medicare Beneficiaries < 65	82	55	142	30
2.4 Hard to Reach Total	48	602	393	111
<i>2.4a Low-Income</i>	23	138	342	48
<i>2.4b Rural</i>	0	450	0	0
<i>2.4c English Second Language</i>	25	14	51	63
2.5 Enrollment Topics	1,054	504	1,886	732

Planning and Service Area (PSA)	Application Assistance Provided for Medicare Part D Extra Help/Low-Income Subsidy (LIS) and the Medicare savings Programs (MSPs).
5 – Marin	Not Yet Released by CDA
26 – Lake/Mendocino	Not Yet Released by CDA
27 – Sonoma	Not Yet Released by CDA
28 – Solano/Napa	Not Yet Released by CDA

- 2.21. Provide timely input to the State HICAP Office (upon request) of any SHIP or CMS, required reports, including, but not limited to, the SHIP Grant Application, Supplemental Grant Funding Applications and the SHIP Grant Mid-term Report.
- 2.22. Provide legal referral services to clients in need of legal representation. The subcontractor shall maintain a directory of legal services or a phone number for referral to the local Bar Association for such purposes.
- 2.23. Take reasonable steps to ensure that “alternative communication services” are available to non-English speaking or limited English-speaking persons (LEP) eligible for services under this Agreement. “Alternative communication services” include, but are not limited to, the provision of services and programs by means of the following:
 - a) Interpreters or bilingual providers and provider staff.
 - b) Contracts with interpreter services.
 - c) Use of telephone interpreter lines.
 - d) Sharing of language assistance materials and services with other providers.
 - e) Translated written information materials, including but not limited to, enrollment information and descriptions of available services and programs.
 - f) Referral to culturally and linguistically appropriate community service programs.

3. Compliance with the State Conflict of Interest.

- 3.5. HICAP staff and volunteers shall not engage in the solicitation of insurance, nor endorse any Medicare supplement, long-term care, or other insurance policies or plans, nor endorse the services of any insurer or managed care plan, claims processing organization, or other enterprise that could benefit from activities conducted by HICAP.
- 3.6. All project staff and volunteers shall provide HICAP educational services in a manner that is objective and impartial and provide counseling consistent with the best interests of the clients and which preserves the independent decision-making responsibilities of the client.
- 3.7. HICAP project staff and volunteers shall not have a conflict of interest such as, but not limited to, a business relationship with insurers, health plans, or organizations posing a conflict of interest.
- 3.8. The Contractor shall assure that project staff and volunteers do not accept money or gifts from the clientele in exchange for services in accordance with California Department of Aging (CDA) guidance on conflict of interest and the HICAP Program Manual.
- 3.9. The Contractor shall take all reasonable and necessary measures to assure that advisors, employees, and volunteers associated with the operation of HICAP agree to act in a manner so as to prevent the appearance of impropriety, or any other act which would place in jeopardy HICAP's reputation as an independent and impartial program.
- 3.10. The Contractor shall assure that advisors and governing board members shall recuse themselves from HICAP business if they are employed by, or receive compensation from, the health insurance or managed health care industries. This shall not preclude the Contractor from soliciting program contributions from entities that do not pose a conflict of interest.

4. Voluntary Donations/Program Income: Under this Agreement, Contractor will:

- 4.1. Provide each senior with the opportunity to voluntarily contribute to the cost of the service by developing a notice to participants. Notices provided to participants regarding contributions shall be identified as "voluntary" and contain language that "no individual can be denied participation because of failure or inability to contribute".
- 4.2. These documents cannot include the words "bill, invoice or statement" or otherwise indicate or infer a contribution is required. The template for voluntary contributions must be submitted to AAA Program Staff within thirty (30) days of the contract's start date. Any changes to this template must be communicated to AAA Program Staff prior to use.
- 4.3. Protect the privacy of each senior with respect to contribution made. This privacy protection is to include establishing procedures to safeguard and account for all contributions. Procedures must be submitted to AAA Program Staff within thirty (30) days of the contract's start date.
- 4.4. Ensure that all Program Income is reported and expended under the same terms and conditions as the program funds from which it is generated.

Program Income means revenue generated by the Contractor from contract-supported activities, including voluntary contributions received from a participant for services received. See Exhibit B.

5. Reporting Units of Service:

- 5.1. Data reported must be timely, complete, accurate, and verifiable.
- 5.2. Units of service are based on total program budget which depends on other funding sources in addition to the Area Agency on Aging (AAA).
- 5.3. Activities will be reported to the AAA on a monthly basis, utilizing the software or forms supplied by the AAA. Reports are due by the fifteenth of each month for activities of the previous month, i.e. activities occurring in July will be reported by August 15.
- 5.4. Units of service Units of service will be reviewed monthly by AAA staff.
It is expected by December 31 (the end of the 2nd quarter), Contractor will have provided 50% of the contracted service units. If the actual service units provided are below 90% of this expectation, County and Contractor will meet to discuss the concern. Outcomes may result in Contractor providing a written corrective action plan to County as well as County reallocating funds away from Contractor
- 5.5. The contractor shall submit program performance reports in accordance with AAA requirements.

6. Program Requirements During Emergencies/Disasters

This section applies when a Public Health or County Emergency Order is in place. (i.e. COVID-19).

- 6.1. Services During COVID-19
 - 6.1.1 During the COVID-19 pandemic, programs are allowed to continue to be provided virtually and with maximum flexibility (Section 8.3)
- 6.2. Resumption of Services
 - 6.2.1 When a Public Health or County Emergency Order has been revoked and is no longer enforced, contractor will resume program models/activities as defined by the California Department of Aging Data Dictionary and AAA program implementation expectations.
 - 6.2.2 A Resumption of Services Plan and timeline must be created and submitted to AAA outlining the ability to resume services, with attention to programs with in-person components, in place.
 - 6.2.3 If there is no Resumption of Services Plan in place when the Public Health or County Emergency Order is lifted, the AAA has the discretion to reallocate funds away from the contractor.
- 6.3. Location of Services:
 - 6.3.1 Web based appointments through virtual online applications or programs (i.e., Skype, Zoom, WebEx, Face Time, etc.)
 - 6.3.2 Telephone alternatives

6.3.3 In-person “porch or door” appointments or at tables outside agency offices, following proper social distancing and face-covering protocols

7. Contract Funding:

- 7.1. Agree not to use contract funds to pay the salary or expenses of any individual who is engaging in activities designed to influence legislation or appropriations pending before the Congress (22 CCR § 7364 (a) 2).
- 7.2. Comply with budget reduction in the event the service levels specified in Sections 2.17 and 2.19 are not attained (22 CCR § 7364 (a) 3).

- 8. Service Changes: Proposed changes affecting the provision of services such as changes in paid program staff, program structure/activities, hours/day(s) of service, site additions, site renovations, and temporary or permanent site closures must be communicated in writing to the AAA within 10 (ten) days of proposed date of the change.
- 9. Grievance Policy: Ensure grievance policy is publicly posted and is in compliance per 22 CCR, §7400 Grievance Process.
- 10. Mandated Reporting: Report suspected abuse, neglect, or exploitation of program participants to Sonoma County Adult Protective Services and/or law enforcement. Training provided by Sonoma County Adult Protective Services.
- 11. Service Provider Meeting Requirement: The AAA hosts a service provider meeting to share new information with service providers (contractors). Contractors shall designate a representative to attend each Service Provider meeting.
- 12. Security Awareness Training: Contractor’s employees, subcontractors/vendors, and volunteers who handle confidential, sensitive and/or personal identifying information must complete the Security Awareness Training module by July 30, or 30 days of the start date of the contract, or within thirty (30) days of the start date of any new employee, Subcontractor/Vendor, or volunteer’s employment. Contractor will send signed certificates to AAA staff. Training may be on an individual or group basis. A sign in sheet for a group presentation is acceptable for group trainings.
The training is available at this link: https://www.aging.ca.gov/Information_security/. Scroll to the bottom of the page for the “Privacy & Information Security Awareness Training” in English or Spanish.
- 13. Transition Plan: In the event the agreement is terminated prior to end of the contract term, Contractor shall submit a transition plan to ensure there will be no break in continued service. Transition plan must be received by County within 15 days of delivery of a written Notice of Termination initiated by Contractor, County, or State. At such time, County will provide required elements to be included in the transition plan to Contractor.

Exhibit A-2.1: Scope of Work
Robotic Companion Pets Project - Ombudsman Program

TIME FRAME: July 1, 2021 through September 30, 2022

FUNDING: \$6,846 Coronavirus Aid, Relief, and Economic Securities (CARES) Act
Funding - Robotic Companion Pet Project - Ombudsman

GEOGRAPHIC SERVICE AREA(S): Countywide

**PROGRAM AREA: Robotic Companion Pets for Individuals Living in California
Long-Term Care Settings**

PROGRAM DEFINITIONS specific to the Robotic Companion Pets Project:

- i. Robotic Companion Pet – Lifelike, animatronic pets that are uniquely designed to provide meaningful experiences for older individuals and their families.
 - ii. Robotic Companion Pets Project - a person-centered approach to increasing engagement and enhancing meaningful interactions during and post COVID-19 pandemic.
1. Program Overview: The Robotic Companion Pets Project Ombudsman is designed to combat loneliness and social isolation in residents of Long-Term Care (LTC) facilities. The California Department of Aging (CDA) has been working collaboratively to bridge the digital divide and address inclusion, equity, and social isolation for older Californians, people with disabilities, and caregivers. The CDA Office of the State Long-Term Care Ombudsman (OSLTCO) initiated the Robotic Companion Pets Project- Ombudsman in response to the negative impact COVID-19 has had on residents living in LTC facilities. The Robotic Companion Pets Project - Ombudsman is a person-centered approach to increasing engagement and enhancing meaningful interactions during and post COVID-19 pandemic. Robotic companion pets are designed to enhance meaningful interactions among residents living in LTC facilities, which are congregate living models, but may be experienced as lonely and socially isolated settings.
 2. Program Requirements: Under this Agreement,
 - 2.1. Funding can only be spent on the following allowable items:

Purchasing a Robotic Companion Pet
 - 2.2. Contractor will purchase robotic companion pets that will be distributed as personal property to individual residents living in licensed LTC residential and skilled nursing facilities.
 - Only one robotic companion pet should be given per resident.
 - The pet will belong to the individual resident and should be recorded on the individual's inventory log.
 - Purchase of robotic companion pets for individual Ombudsman representatives is not allowed.

- A sample unit may be reported on the Ombudsman property inventory and retained in the local office if used for training and/or other activities to promote the project.
- 2.3. Contractor may gather information from residents and staff about the impact the robotic companion pet has had on the individual and others at the LTC facility through observation and interviews.
- 2.4. Photographs taken by Ombudsman representatives require documented resident or representative consent. This information shall be reported to the OSLTCO monthly using the CDA 8000 form until all funds are expended.
3. Reporting Units of Service:
- 3.1. Data reported must be timely, complete, accurate, and verifiable.
- 3.2. The Contractor shall (1) track the number of units of service provided and the number of people served and (2) submit this data to AAA as directed.
- 3.3. The Contractor shall report data to AAA for the Ombudsman Robotic Companion Pets Project, using the CDA form 8000, and maintain records pertaining to recipient identification, number of robotic companion pets purchased, number of residents who received a robotic companion pet, and the number of facilities, including facility type, impacted. Records may include information about the impact the robotic companion pet has had on the individual and others at the LTC facilities.
- 3.4. The Contractor is required to submit monthly expenditure reports. To report expenditures, Contractors must use the "Ombudsman Robotic Pet Expenditure Report Form" (CDA 8001).
- 3.5. Ombudsman Robotic Pet Units of service are based on total program budget which depends on other funding sources in addition to the Area Agency on Aging (AAA).
- 3.6. Activities will be reported to the AAA on a monthly basis, utilizing the software or forms supplied by the AAA. Reports are due by the fifteenth of each month for activities of the previous month, i.e. activities occurring in July will be reported by August 15.
- 3.7. The contractor shall submit program performance reports in accordance with AAA requirements.
4. Service Compliance:
- 4.1. Ensure contract is in full contract compliance within 120 days of the beginning date of the contract. County shall evaluate the contractor's capacity to fulfill contract goals if full compliance by this time period has not occurred (22 CCR § 7364 (c)).
- 4.2. Comply with program standards, service priorities, and responsibilities consistent with statewide standards as they are released or identified by AAA or state licensing body.
5. Service Changes: Proposed changes affecting the provision of services must be communicated in writing to the AAA within 10 (ten) days of proposed date of the change.

6. Grievance Policy: Ensure grievance policy is publicly posted and is in compliance per 22 CCR, §7400 Grievance Process.
7. Mandated Reporting: Report suspected abuse, neglect, or exploitation of program participants to Sonoma County Adult Protective Services and/or law enforcement. Training provided by Sonoma County Adult Protective Services.
8. Service Provider Meetings Requirement: The AAA hosts service provider meetings to share new information with service providers (contractors). Contractors shall designate a representative to attend each Service Provider meeting.
9. Security Awareness Training: Contractor's employees, subcontractors/vendors, and volunteers who handle confidential, sensitive and/or personal identifying information must complete the Security Awareness Training module by July 30, or 30 days of the start date of the contract, or within thirty (30) days of the start date of any new employee, Subcontractor/Vendor, or volunteer's employment. Contractor will send signed certificates to AAA staff. Training may be on an individual or group basis. A sign in sheet for a group presentation is acceptable for group trainings.

The training is available at this link: https://www.aging.ca.gov/Information_security/. Scroll to the bottom of the page for the "Privacy & Information Security Awareness Training" in English or Spanish.
10. Transition Plan: In the event the agreement is terminated prior to end of the contract term, Contractor shall submit a transition plan to ensure there will be no break in continued service. Transition plan must be received by County within 15 days of delivery of a written Notice of Termination initiated by Contractor, County, or State. At such time, County will provide required elements to be included in the transition plan to Contractor.

Exhibit A-3.1: Scope of Work

Elder Justice

TIME FRAME: 07/01/21 - 06/30/22

FUNDING: Coronavirus Response and Relief Supplemental Appropriations Act (CRRSA) [Social Security Act Title XX Elder Justice], H.R. 6074

GEOGRAPHIC SERVICE AREA(S): Countywide

PROGRAM AREA: **Elder Justice CFDA 93.747**

1. Program Overview:

This funding is intended to support existing efforts by the Long-Term Care Ombudsman Program. Funds expended from the Coronavirus Response and Relief Supplemental Appropriations Act, 2021 are to be spent in accordance with Elder Justice Act Section 2043(a) for Ombudsman programs to respond to the Coronavirus Emergency. Ombudsman programs must expend funds on allowable activities as defined by the Elder Justice Act and state and local policy. This funding is intended to enhance, improve, and expand the ability of Ombudsman programs to investigate allegations of abuse, neglect, and exploitation in the context of COVID-19.

2. Program Requirements:

- 2.1. Title XX Elder Justice funding is not open to any flexibilities and must be expended on allowable services and activities.
- 2.2. The Long-Term Care Ombudsman Program (LTCOP), consistent with federal and state statute applicable to Title XX Elder Justice, and policies and procedures established by the Office of the State Long-Term Care Ombudsman (OSLTCO), will:
 - a. Enhance Ombudsman program complaint investigations during the COVID-19 public health emergency to address complaints related to abuse, neglect and poor care;
 - b. Resume in-person visitation at such time as visitation is permitted, such as when the COVID-19 vaccine is accessible to residents, facility staff, and individuals working for the LTCOP;
 - c. Conduct education and outreach on abuse and neglect identification and prevention during the COVID-19 public health emergency to residents, their families and facility staff;
 - d. Enable travel for representatives of the LTCO Office to ensure all residents have access to a LTCOP representative;
 - e. Continue purchase of needed Personal Protective Equipment;
 - f. Continue purchase of technology as needed;

- g. Enable participation in state-level “strike teams” to address complaints related to care and neglect; and
 - h. Provide information and assistance on transitions from long-term care facilities to community-based, home care settings, consistent with section 712(a)(3) of the Older Americans Act.
- 3. Reporting Provisions Specific to Title XX Elder Justice:
 - 3.1. This funding is separate from all other funding and must be tracked separately.
 - 3.2. Data should not be tracked in the NAPIS/SPR systems. At a minimum and where possible, contractor should record the number of clients to whom service is provided, the name or category of services provided, the number of units of service provided, and the expenditures related to providing such services.
 - 3.3. Contractor is required to report expenditures monthly. To report expenditures, contractor must use the “Elder Justice Expenditure Report Form” (CDA 7031) located under the Fiscal Forms and Documents page on CDA’s website. The Contractor shall submit a monthly expenditure report to AAA no later than the last business day of each month.
 - 3.4. The Contractor must document all activities, cases, and complaints in accordance with the National Ombudsman Reporting System (NORS) data collection requirements and that this data is routinely entered into the states’ reporting software (ODIN).
- 4. Contract Funding:
 - 4.1. This funding is separate from all other funding and must be tracked separately.
 - 4.2. Agree not to use contract funds to pay the salary or expenses of any individual who is engaging in activities designed to influence legislation or appropriations pending before the Congress (22 CCR § 7364 (a) 2).
- 5. Service Compliance:
 - 5.1. Comply with program standards, service priorities, and responsibilities consistent with statewide standards as they are released or identified by AAA or state licensing body.
- 6. Service Changes: Proposed changes affecting the provision of services such as changes in paid program staff, program structure/activities, hours/day(s) of service, site additions, site renovations, and temporary or permanent site closures must be communicated in writing to the AAA within 10 (ten) days of proposed date of the change.
- 7. Grievance Policy: Ensure grievance policy is publicly posted and is in compliance per 22 CCR, §7400 Grievance Process.
- 8. Mandated Reporting: Report suspected abuse, neglect, or exploitation of program participants to Sonoma County Adult Protective Services and/or law enforcement. Training provided by Sonoma County Adult Protective Services.

9. Service Provider Meetings Requirement: The AAA hosts service provider meetings to share new information with service providers (contractors). Contractors shall designate a representative to attend each Service Provider meeting.
11. Security Awareness Training: Contractor's employees, subcontractors/vendors, and volunteers who handle confidential, sensitive and/or personal identifying information must complete the Security Awareness Training module by July 30, or 30 days of the start date of the contract, or within thirty (30) days of the start date of any new employee, Subcontractor/Vendor, or volunteer's employment. Contractor will send signed certificates to AAA staff. Training may be on an individual or group basis. A sign in sheet for a group presentation is acceptable for group trainings.

The training is available at this link: https://www.aging.ca.gov/Information_security/. Scroll to the bottom of the page for the "Privacy & Information Security Awareness Training" in English or Spanish.

10. Transition Plan: In the event the agreement is terminated prior to end of the contract term, Contractor shall submit a transition plan to ensure there will be no break in continued service. Transition plan must be received by County within 15 days of delivery of a written Notice of Termination initiated by Contractor, County, or State. At such time, County will provide required elements to be included in the transition plan to Contractor.

Exhibit A-4: Scope of Work

Medicare Improvement for Patients and Providers Act (MIPPA) Program

TIME FRAME: 7/1/2021 – 6/30/2022

FUNDING: Medicare Improvement for Patients and Providers Act (MIPPA)
Federal Funds

GEOGRAPHIC SERVICE AREA(S): Countywide

PROGRAM AREA: Medicare Improvement for Patients and Providers Act (MIPPA)

1. Program Overview: Medicare Improvements for Patients and Providers Act (MIPPA) of 2008 program was created via legislation that amended Titles XVIII and XIX of the Social Security Act to extend expiring provisions under the Medicare program, to improve beneficiary access to preventive and mental health services, to enhance low-income benefit programs, and to maintain access to care in rural areas, including pharmacy access.
2. Program Definitions:
 - a. **Eligible Service Population** means individuals defined as Medicare eligible beneficiaries likely to be qualified for Medicare Part D, the Low-Income Subsidy (LIS) Prescription Drug Program, and/or the Medicare Savings Programs (MSP).
 - b. **Enhanced Outreach** means outreach activities that include, but are not limited to, disease prevention and promoting wellness and are above and beyond routine activities planned in response to other funding (e.g., Basic State Health Insurance Assistance Program [SHIP] funds or Older Americans Act [OAA] outreach funds).
 - c. **Enrollment Assistance** means one-on-one assistance to beneficiaries completing and submitting LIS and MSP applications. Enhanced outreach alone does not meet the requirement for enrollment assistance.
 - d. **Low-Income Subsidy (LIS)** means a federal program that provides financial assistance with Part D premiums and cost sharing for eligible low-income Medicare beneficiaries.
 - e. **Medicare Savings Programs (MSP)** means three programs that serve Medicare beneficiaries who do not qualify for full Medi-Cal: Qualified Medicare Beneficiaries, Specified Low-Income Medicare Beneficiaries, and Qualified Individuals. Beneficiaries enrolled in one of these Medicare Savings Programs automatically receive LIS.
 - f. **State Health Insurance Assistance Program (SHIP)** In California, SHIP is the same program as the Health Insurance Counseling and Advocacy Program (HICAP) with SHIP used interchangeably with HICAP. SHIP means a national program supported by the federal Administration for Community Living (ACL) that offers one-on-one counseling and assistance to people with Medicare and their families. Through federal grants directed to states, SHIPs provide free counseling and assistance via telephone and face-to-face interactive sessions, public education presentations and programs, and media activities.

3. Program Requirements:

- 3.1. All MIPPA activities must be over and above those related activities provided through other funding sources (e.g., OAA funding and the basic federal SHIP/State HICAP funds), and they must support attainment of performance objectives specified by the California Department of Aging (CDA) (available on the CDA website).
- 3.2. The services shall be performed in Planning and Service Area(s): 5, 26, 27, 28.
 - a. Marin – PSA 5
 - b. Lake/Mendocino – PSA 26
 - c. Sonoma – PSA 27
 - d. Napa/Solano – PSA 28
- 3.3. The Contractor, directly or through coordination and collaboration with the County AAA, local aging network resources, and community partners shall:
 - a. Ensure services are provided to the Eligible Service Population as defined in Section 2 (a) – Program Definitions.
 - b. Comply with standards and guidelines for procurement of supplies, equipment, and services as provided by CFR 200 Subpart D – Procurement Standards.
 - c. Provide enhanced outreach and education to eligible Medicare beneficiaries regarding limited income benefits and application assistance to individuals who may be eligible for LIS or MSPs.
 - d. Conduct outreach activities aimed at preventing disease and promoting wellness.
- 3.4. Develop, update, and implement the CDA approved local MIPPA work plan, which is hereby incorporated by reference. The work plan must delineate how the Contractor and County will coordinate efforts and resources to achieve the performance objectives identified by CDA.
- 3.5. Updates to the MIPPA work plan will be required if substantial changes are proposed by the CDA or the County during the contract period.
- 3.6. Take reasonable steps to ensure that “alternative communication services” are available to non-English speaking or LEP beneficiaries of services. [22 CCR 11162] to meet the linguistic needs of identified eligible client population groups at key points of contact. Key points of contact include, but are not limited to, telephone contacts, office visits and in-home visits.

Alternative Communication Services include, but are not limited to:

- a. Interpreters or bilingual providers and provider staff.
- b. Contracts with interpreter services.
- c. Use of telephone interpreter lines.

- d. Sharing of language assistance materials and services with other providers.
- e. Translated written information materials, including but not limited to, enrollment information and descriptions of available services and programs.
- f. Make referral to culturally and linguistically appropriate community service programs.

4. Performance Measures:

4.1. MIPPA related activities that will determine whether Contractor met the established measures which include:

- a. The number of one-on-one beneficiary contacts that involve discussion or assistance with:
 - Low-Income Subsidy benefits and applications,
 - Medicare Savings Program benefits and applications, and
 - Medicaid benefits for dual eligibles.
- b. The number of events conducted that involve:
 - Target outreach to beneficiaries in rural areas,
 - Target outreach to low-income beneficiaries,
 - Education/Information on the Low-Income Subsidy, Medicare Savings Programs, and/or Medicaid benefits for dual eligible and/or;
 - Education/information on Medicare Preventive benefits.

5. Voluntary Donations/Program Income:

- 5.1. Provide each senior with the opportunity to voluntarily contribute to the cost of the service by developing a notice to participants. Notices provided to participants regarding contributions shall be identified as “voluntary” and contain language that “no individual can be denied participation because of failure or inability to contribute”.

These documents cannot include the words “bill, invoice or statement” or otherwise indicate or infer a contribution is required. The template for voluntary contributions must be submitted to AAA Program Staff within thirty (30) days of the contract’s start date. Any changes to this template must be communicated to AAA Program Staff prior to use.

- 5.2. Protect the privacy of each senior with respect to contribution made. This privacy protection is to include establishing procedures to safeguard and account for all contributions. Procedures must be submitted to AAA Program Staff within thirty (30) days of the contract’s start date.
- 5.3. Ensure that all Program Income is reported and expended under the same terms and conditions as the program funds from which it is generated. Program Income means revenue generated by the Contractor from contract-supported activities, including voluntary contributions received from a participant for services received. See Exhibit B.

6. Reporting Units of Service:

- 6.1. The Contractor shall report work completed using the Statewide HICAP Automated Reporting Program (SHARP).
- 6.2. The Contractor shall ensure that all performance data is submitted according to CDA-approved reporting procedures and timelines and is timely, complete, accurate, and verifiable.
- 6.3. Units of service are based on total program budget which depends on other funding sources in addition to the Area Agency on Aging (AAA).
- 6.4. Activities will be reported to the AAA on a monthly basis, utilizing the software or forms supplied by the AAA. Reports are due by the fifteenth of each month for activities of the previous month, i.e. activities occurring in July will be reported by August 15.
- 6.5. Performance Measures will be reviewed monthly by AAA staff.

It is expected that, by December 31 (the end of the 2nd quarter), Contractor will have provided 50% of the contracted service units. If the actual service units provided are below 90% of this expectation, County and Contractor will meet to discuss the concern. Outcomes may result in Contractor providing a written corrective action plan to County as well as County reallocating funds away from Contractor.
- 6.6. The contractor shall submit program performance reports in accordance with AAA requirements.
- 6.7. Narrative reports are due to AAA at dates to be specified by CDA.
- 6.8. All narrative reports shall specify how the contract funds were used, progress to date in achieving MIPPA Work Plan objectives, barriers encountered, and steps taken to overcome these barriers.

7. Service Compliance:

- 7.1. The Contractor shall maintain adequate staff to meet the contractor's Agreement. This staff shall be available to the State for training and meetings which the State may find necessary from time to time.
- 7.2. The contractor shall be in good standing with the Secretary of State of California and shall maintain that status throughout the term of the Agreement.
- 7.3. The Contractor shall comply with program standards, service priorities, and responsibilities consistent with statewide standards as they are released or identified by AAA or state licensing body.

8. Service Changes: Proposed changes affecting the provision of services must be communicated in writing to the AAA within 10 (ten) days of proposed date of the change.

9. Grievance Policy: Ensure grievance policy is publicly posted and is in compliance per 22 CCR, §7400 Grievance Process.

10. Mandated Reporting: Report suspected abuse, neglect, or exploitation of program participants to Sonoma County Adult Protective Services and/or law enforcement. Training provided by Sonoma County Adult Protective Services.
11. Service Provider Meetings Requirement: The Contractor is to convene the partner AAAs (PSA5, PSA26, PSA28) as per the Memorandum of Understanding on a quarterly basis.
12. Security Awareness Training: Contractor's employees, subcontractors/vendors, and volunteers who handle confidential, sensitive and/or personal identifying information must complete the Security Awareness Training module by July 30, or 30 days of the start date of the contract, or within thirty (30) days of the start date of any new employee, Subcontractor/Vendor, or volunteer's employment. Contractor will send signed certificates to AAA staff. Training may be on an individual or group basis. A sign in sheet for a group presentation is acceptable for group trainings.

The training is available at this link: https://www.aging.ca.gov/Information_security/. Scroll to the bottom of the page for the "Privacy & Information Security Awareness Training" in English or Spanish.
13. Transition Plan In the event the agreement is terminated prior to end of the contract term, Contractor shall submit a transition plan to ensure there will be no break in continued service. Transition plan must be received by County within 15 days of delivery of a written Notice of Termination initiated by Contractor, County, or State. At such time, County will provide required elements to be included in the transition plan to Contractor.

Exhibit B: Fiscal Provisions/Budgets

7. Payment. All or part of this Agreement will be paid with Federal awards. As a pass-through entity, the County is required to provide certain information regarding Federal award(s) to Contractor as a sub recipient. In signing this Agreement, Contractor acknowledges receipt of the following information regarding Federal award(s) that will be used to pay this Agreement:

Assistance Listing Program Title:

Robotic Companion Pet Project - Coronavirus Aid, Relief, and Economic Security (CARES) Act for Ombudsman Program under Title VII of the Older Americans Act

ALN: 93.042

Federal Agency: Department of Health and Human Services, Administration for Community Living

FAIN#: 2101CAOMC3-01

Assistance Listing Program Title:

Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act, 2021 funding for Long Term Care Ombudsman, Social Security Act Title XX Section 2043 (a)(1)(A), and Title VII Elder Justice.

ALN: 93.747

Federal Agency: Department of Health and Human Services, Administration for Community Living

FAIN#: 2101CALOC5-00

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8. Funding Allocation Summary.

Program	CFDA#	Area Agency on Aging (AAA) Funds					Local Funds	FY 21/22 Baseline	FY 21/22 Adjustment	Total FY 21/22 Contract	Amendment #3 Changes
		Federal	Federal Baseline Adjustment	One-Time-Only (OTO)	State	State Baseline Adjustment	Marin General Fund				
OMBUDSMAN											
OAA IIIB Supportive Services		\$17,822	\$0	\$0	\$0	\$0	\$0	\$17,822	\$0	\$17,822	
Ombudsman Title IIIB	93.044	\$28,365	\$0	\$4,280	\$173,583	\$0	\$0	\$201,948	\$4,280	\$206,228	\$4,280
Ombudsman VIIA	93.042	\$42,418	\$0	\$2,641	\$0	\$0	\$0	\$42,418	\$2,641	\$45,059	\$2,641
Ombudsman Title VII OMSP (Pets)	93.042	\$6,846	\$0	\$0	\$0	\$0	\$0	\$6,846	\$0	\$6,846	\$6,846
State Public Health L&C		\$0	\$0	\$0	\$7,263	\$0	\$0	\$7,263	\$0	\$7,263	
State Health Facilities Citations Penalties (SNF) Quality and Accountability		\$0	\$0	\$13,999	\$15,315	\$0	\$0	\$15,315	\$13,999	\$29,314	\$13,999
American Rescue Plan		\$0	\$0	\$0	\$34,500	\$0	\$0	\$34,500	\$0	\$34,500	
		\$16,958	\$0	\$0	\$0	\$0	\$0	\$16,958	\$0	\$16,958	\$16,958
Ombudsman Total		\$112,409	\$0	\$20,920	\$230,661	\$0	\$0	\$343,070	\$20,920	\$363,990	\$44,724
HICAP	93.324										
Reimbursement (Ins Fund)		\$0	\$0	\$0	\$180,421	\$0	\$0	\$180,421	\$0	\$180,421	
State HICAP Fund		\$0	\$0	\$0	\$90,172	\$0	\$0	\$90,172	\$0	\$90,172	
State HICAP Augmentation Fund (for 1 FTE Volunteer Coord)		\$0	\$0	\$0	\$53,307	\$0	\$0	\$53,307	\$0	\$53,307	
Federal SHIP Funds for 7/1/21 through 3/31/22		\$87,068	\$0	\$0	\$0	\$0	\$0	\$87,068	\$0	\$87,068	
Federal SHIP Funds for 4/1/22 through 6/30/22		\$28,997	\$0	\$0	\$0	\$0	\$0	\$28,997	\$0	\$28,997	
Marin Contribution		\$0	\$0	\$0	\$0	\$0	\$13,170	\$13,170	\$0	\$13,170	
HICAP Total		\$116,065	\$0	\$0	\$323,900	\$0	\$13,170	\$453,135	\$0	\$453,135	
MIPPA - For 7/1/21 through 8/30/21	93.071	\$23,851	\$0	\$0	\$0	\$0	\$0	\$23,851	\$0	\$23,851	
MIPPA - For 9/1/22 through 6/30/22	93.071	\$0	\$71,495	\$0	\$0	\$0	\$0	\$0	\$71,495	\$71,495	
Elder Justice CRRSA	93.747	\$7,575	\$0	\$0	\$0	\$0	\$0	\$7,575	\$0	\$7,575	\$7,575
Elder Abuse Prevention VIIB	93.041	\$6,550	\$0	\$637	\$0	\$0	\$0	\$6,550	\$637	\$7,187	\$637
CONTRACT TOTAL		\$258,875	\$71,495	\$21,557	\$554,561	\$0	\$13,170	\$826,606	\$21,557	\$927,233	
Amendment #3 Changes		\$31,379		\$21,557							\$52,936

9. Budgets.

9.1. Title III B – Ombudsman

LINE ITEMS FOR PROGRAM COST CATEGORIES	AAA FUNDS	MATCH		REALIGNMENT		NON-MATCH		PROGRAM INCOME	TOTAL
		CASH	IN-KIND	MATCH	NON-MATCH	CASH	IN-KIND		
PERSONNEL									
Salaries	181,636								181,636
Benefits	4,852								4,852
TOTAL PERSONNEL	\$186,488								\$186,488
TRAVEL & TRAINING									
Staff Travel						1,572			1,572
Staff Training	521								521
TOTAL TRAVEL & TRNG.	\$521					\$1,572			\$2,093
EQUIPMENT									
Expendable Equipment									
Non-expendable Equipment									
TOTAL EQUIPMENT									
TOTAL CONSULTANTS									
OTHER COSTS:									
Rent/Bldg. Maintenance									
Communications						1,886			1,886
Utilities						3,082			3,082
Office Supplies						2,515			2,515
Printing						2,200			2,200
Postage						1,069			1,069
Employee Mileage									
Repairs & Maintenance						2,434			2,434
Outreach/advertising						694			694
Outside Services	14,931								14,931
Insurance	4,280					435			4,715
Publications/Members.						2,389			2,389
Other	8					20,048			20,056
TOTAL OTHER COSTS	\$19,219					\$36,752			\$55,971
* INDIRECT COSTS									
TOTAL PROGRAM COSTS	\$206,228					\$38,324			\$244,552

9.2. Title VII A – Ombudsman

LINE ITEMS FOR PROGRAM COST CATEGORIES	AAA FUNDS	MATCH		REALIGNMENT		NON-MATCH		PROGRAM INCOME	TOTAL
		CASH	IN-KIND	MATCH	NON-MATCH	CASH	IN-KIND		
PERSONNEL									
Salaries	38,152								38,152
Benefits	1,019								1,019
TOTAL PERSONNEL	\$39,171								\$39,171
TRAVEL & TRAINING									
Staff Travel	273								273
Staff Training	90								90
TOTAL TRAVEL & TRNG.	\$363								\$363
EQUIPMENT									
Expendable Equipment									
Non-expendable Equipment									
TOTAL EQUIPMENT									
TOTAL CONSULTANTS									
OTHER COSTS:									
Rent/Bldg. Maintenance									
Communications						327			327
Utilities	535								535
Office Supplies	437								437
Printing	382								382
Postage	186								186
Employee Screening/Testing									
Repairs & Maintenance	423								423
Outreach/advertising	121								121
Outside Services	2,592								2,592
Insurance	584					235			819
Publications/Members.	265					150			415
Other						5,866			5,866
TOTAL OTHER COSTS	\$5,525					\$6,578			\$12,103
* INDIRECT COSTS									
TOTAL PROGRAM COSTS	\$45,059					\$6,578			\$51,637

9.3. Ombudsman Special Deposit {includes OAA IIIB Supportive Services funds}

LINE ITEMS FOR PROGRAM COST CATEGORIES	AAA FUNDS	MATCH		COUNTY REALIGNMENT		NON-MATCH		PROGRAM INCOME	TOTAL
		CASH	IN-KIND	MATCH	NON-MATCH	CASH	IN-KIND		
PERSONNEL									
Salaries	73,165								73,165
Benefits	1,800								1,800
TOTAL PERSONNEL	\$74,965								\$74,965
TRAVEL & TRAINING									
Staff Travel	377								377
Staff Training	125								125
TOTAL TRAVEL & TRNG.	\$502								\$502
EQUIPMENT									
Expendable Equipment									
Non-expendable Equipment									
TOTAL EQUIPMENT									
TOTAL CONSULTANTS									
OTHER COSTS:									
Rent/Bldg. Maintenance									
Communications	453								453
Utilities	740								740
Office Supplies	604								604
Printing	528								528
Postage	256								256
Employee Screening/Testing									
Repairs & Maintenance	584								584
Outreach/advertising	105								105
Outside Services	3,584								3,584
Insurance	1,132								1,132
Publications/Members.	573								573
Other	4,873								4,873
TOTAL OTHER COSTS	\$13,432								\$13,432
* INDIRECT COSTS									
TOTAL PROGRAM COSTS	\$88,899								\$88,899

9.6. Title VII B – Elder Abuse Prevention

LINE ITEMS FOR PROGRAM COST CATEGORIES	AAA FUNDS	MATCH		COUNTY REALIGNMENT		NON-MATCH		PROGRAM INCOME	TOTAL
		CASH	IN-KIND	MATCH	NON-MATCH	CASH	IN-KIND		
PERSONNEL									
Salaries	5,891								5,891
Benefits	157								157
TOTAL PERSONNEL	\$6,048								\$6,048
TRAVEL & TRAINING									
Staff Travel	43								43
Staff Training									
TOTAL TRAVEL & TRNG.	\$43								\$43
EQUIPMENT									
Expendable Equipment									
Non-expendable Equipment									
TOTAL EQUIPMENT									
TOTAL CONSULTANTS									
OTHER COSTS:									
Rent/Bldg. Maintenance									
Communications	51								51
Utilities	83								83
Office Supplies	68								68
Printing	60								60
Postage	29								29
Employee Screening/Testing									
Repairs & Maintenance	66								66
Outreach/advertising									
Outside Services	404								404
Insurance	128								128
Publications/Members.	65								65
Other	142								893
TOTAL OTHER COSTS	\$1,096					751			\$1,847
* INDIRECT COSTS									
TOTAL PROGRAM COSTS	\$7,187					\$751			\$7,938

9.7. American Rescue Plan Ombudsman Augmentation

LINE ITEMS FOR PROGRAM COST CATEGORIES	AAA FUNDS	MATCH		COUNTY REALIGNMENT		NON-MATCH		PROGRAM INCOME	TOTAL
		CASH	IN-KIND	MATCH	NON-MATCH	CASH	IN-KIND		
PERSONNEL									
Salaries	15,105					339			15,444
Benefits	1,853								1,853
TOTAL PERSONNEL	\$16,958					\$339			\$17,297
TRAVEL & TRAINING									
Staff Travel									
Staff Training									
TOTAL TRAVEL & TRNG.									
EQUIPMENT									
Expendable Equipment									
Non-expendable Equipment									
TOTAL EQUIPMENT									
TOTAL CONSULTANTS									
OTHER COSTS:									
Rent/Bldg. Maintenance									
Communications									
Utilities									
Office Supplies									
Printing									
Postage									
Employee Screening/Testing									
Repairs & Maintenance									
Outreach/advertising									
Outside Services									
Insurance									
Publications/Members.									
Other									
TOTAL OTHER COSTS									
* INDIRECT COSTS									
TOTAL PROGRAM COSTS	\$16,958					\$339			\$17,297

Except as expressly modified in this Amendment, the terms and conditions of Agreement Number AA-SAS-ADV-2122 and Amendments 1 and 2 shall remain in full force.

IN WITNESS WHEREOF, the parties hereto have caused this Amendment to be fully executed by their authorized representatives.

This Amendment shall be effective on and as of the date of the last signature.

CONTRACTOR

COUNTY OF SONOMA

Senior Advocacy Services

By:

Digitally signed by Crista Barnett Nelson
DN: cn=Crista Barnett Nelson, o=Senior Advocacy Services, ou=SAS, email=crista@sam.org, c=US
Date: 2022.02.28 14:45:11 -0800

Name: Crista Barnett Nelson

Title: Executive Director

Date:

By:

Name: Angela Struckmann

Title: Director, Human Services
Department

Date:

APPROVED AS TO SUBSTANCE FOR
COUNTY

By:

Paul Dunaway

Paul Dunaway (Mar 2, 2022 08:13 PST)

Name: Paul Dunaway

Title: Director, Adult & Aging Services
Division

☐ EXEMPT FROM COUNTY COUNSEL
REVIEW

APPROVED AS TO FORM FOR COUNTY

By:

Adam Radtke, Deputy
County Counsel

☒ CERTIFICATES OF INSURANCE ON FILE
WITH COUNTY

☐ INSURANCE REQUIREMENT CHANGES
APPROVED OR WAIVED BY RISK
MANAGEMENT

By:

J. Sabbag