

**NAPA COUNTY AGREEMENT NO. 210259B
AMENDMENT NO. 2**

THIS AMENDMENT NO. 2 TO AGREEMENT NO. 210259B is effective as of this _____ of _____, 2022 by and between NAPA COUNTY, a political subdivision of the State of California, hereinafter referred to as COUNTY," and **COMMUNITY HEALTH INITIATIVE NAPA COUNTY, INC.**, a California nonprofit corporation whose mailing address is 2140 Jefferson Street, Suite D, Napa, CA 94559, hereinafter referred to as "CONTRACTOR." COUNTY and CONTRACTOR may be referred to below collectively as "Parties" and individually as "Party."

RECITALS

WHEREAS, on or around January 1, 2021, COUNTY and CONTRACTOR entered into Napa County Agreement No. 210259B (hereinafter referred to as "Agreement") for CONTRACTOR to provide Medi-Cal Outreach, Enrollment and Retention services under the Medi-Cal Navigators Project to increase the number of hard-to-reach potentially eligible Medi-Cal persons by assisting individuals with completing applications and renewals both onsite and at outreach locations; and

WHEREAS, as of January 1, 2022, the Parties amended the Agreement to extend the term date to June 30, 2022 and increase the contract maximum payable to CONTRACTOR to include additional funding from the California Department of Health Care Services and replace Exhibit A (Scope of Work) with Exhibit A-1 (Scope of Work) to add another day of service at an outreach location; and replace Exhibit B (Compensation) with Exhibit B-1 (Compensation) to revise the Agreement's budget;and

WHEREAS, as of the effective date of this Amendment No. 2, Parties wish to amend the Agreement to extend the term date to September 30, 2022 and increase the contract maximum payable to CONTRACTOR to include additional funding from the California Department of Health Care Services and replace Exhibit A-1 (Scope of Work) with Exhibit A-2 to expand services to include outreach to current beneficiaries to ensure continued Medi-Cal coverage; and replace Exhibit B-1 (Compensation) with Exhibit B-2 to revise the Agreement's budget.

TERMS

NOW, THEREFORE, for good and valuable consideration, the adequacy and receipt of which are hereby acknowledged, the Parties amend the Agreement, as follows:

1. Effective of the date of this Amendment No. 2 through September 30, 2022, the maximum amount of the Agreement shall be **One-Hundred Twenty-Three Thousand Five Hundred Forty-Four Dollars (\$163,544.00)**, reflecting an increase of **Forty Thousand Dollars (\$40,000.00)** provided however, that such amounts shall not be construed as guaranteed sums, and compensation shall be based upon services actually rendered and expenses actually incurred.

2. Exhibit A-1 is hereby replaced in its entirety with "Exhibit A-2" attached hereto and incorporated by this reference herein; all references in the Agreement to Exhibit "A" and Exhibit "A-1" shall refer to "Exhibit A-2" from the effective date of this Amendment No. 2.
3. Exhibit B-1 is hereby replaced in its entirety with "Exhibit B-2" attached hereto and incorporated by this reference herein; all references in the Agreement to Exhibit "B" and Exhibit "B-1" shall refer to "Exhibit B-2" from the effective date of this Amendment No. 2.
4. Except as provided above, the terms and conditions of the Agreement shall remain in full force and effect as originally approved.

IN WITNESS WHEREOF, the Parties hereto have executed this Amendment No. 2 to Napa County Agreement No. 210259B as of the date first written above.

Community Health Initiative Napa County, Inc.

DocuSigned by:
Elba Gonzalez-Mares
 By _____
5220FBCAB73A47A...
 ELBA GONZALEZ-MARES, Executive Director

DocuSigned by:
Matthew Smith
 By _____
30C54078EC6848E...
 MATTHEW SMITH, Vice President

"CONTRACTOR"

NAPA COUNTY, a political subdivision of the State of California

By _____
 RYAN GREGORY
 Chair of the Board of Supervisors

"COUNTY"

<p>APPROVED AS TO FORM Office of County Counsel</p> <p>By: <i>Corey S. Utsurogi</i></p> <p>Date: 9/13/22</p>	<p>APPROVED BY THE NAPA COUNTY BOARD OF SUPERVISORS</p> <p>Date: _____</p> <p>Processed By: _____</p> <p>_____ Deputy Clerk of the Board</p>	<p>ATTEST: NEHA HOSKINS Clerk of the Board of Supervisors</p> <p>By: _____</p>
--	--	--

EXHIBIT "A-2"
MEDI-CAL NAVIGATOR PROJECT
SCOPE OF WORK

CONTRACTOR shall provide COUNTY OF NAPA – SELF-SUFFICIENCY SERVICES DIVISION with the following services:

- I. CONTRACTOR will provide Medi-Cal Outreach, Application Assistance, Enrollment and Retention services under the Medi-Cal Navigators Project to increase the number of hard-to-reach potentially eligible Medi-Cal persons by assisting individuals with completing applications and renewals both onsite and at outreach locations.

- II. CONTRACTOR agrees to meet the following program goals:
 - a) To educate the community and our partners both community and agency on the Medi-Cal program reaching at least 2,400 individuals
 - b) To assist in enrolling Napa County residents in the Medi-Cal program by 1,200. CONTRACTOR agrees to assist in enrolling of at least 333 individuals.
 - c) To assist in the retention of Napa County residents in the Medi-Cal program by 840. CONTRACTOR agrees to assist in retention of 300 individuals.

- III. Target Population

The opportunity to have outreach staff actively reach out and engage uninsured individuals, assist in enrolling them in health coverage, and keep those who remain eligible covered, results in the health of the community benefiting by having continuous access to coverage and care.

CONTRACTOR agrees to focus outreach, enrollment and retention efforts and reach uninsured county residents who are Medi-Cal eligible, with a focus on the following eleven targeted populations:

- i. Persons with mental health disorder needs
- ii. Persons with substance use disorder needs;
- iii. Persons with other disabilities;
- iv. Aged persons;
- v. Persons who are homeless;
- vi. Young people of color;
- vii. Immigrants and families of mixed immigration status;
- viii. Persons with limited English proficiency;
- ix. Low-wage workers and their families or dependents.
- x. Uninsured children and youth formerly enrolled in Medi-Cal

- xi. Persons who are in county jail or state prison, on state parole, on county probation, or under post release community supervision

IV. CONTRACTOR will provide the following services to include:

i. Outreach:

CONTRACTOR will engage individuals and provide information and education regarding how to apply for Medi-Cal benefits, if eligible.

ii. Enrollment:

CONTRACTOR shall assist applicants with the completion of the Medi-Cal application (either electronically, over the phone or through paper applications). CONTRACTOR will outreach to all Medi-Cal applicants who have documentation pending and referred to CONTRACTOR from COUNTY to increase probability of completing the intake process.

iii. Retention

CONTRACTOR shall outreach to Medi-Cal renewal cases to engage individuals and provide information and education regarding how to maintain Medi-Cal benefits, if eligible. Provide contact with individuals who's Medi-Cal has been discontinued to educate and offer information regarding 90-day cure in order to retain Medi-Cal, if eligible. Verify addresses of those individuals they contact.

iv. Capacity Building

CONTRACTOR shall increase access points and opportunities for individuals to receive information and apply for health insurance; continue to maintain a good faith effort to increase the number of access points, maintain existing capacity and keep overall network/system current in the latest information and trends related to health insurance for the uninsured, insured and underinsured.

V. CONTRACTOR will provide Medi-Cal Outreach and Retention staffing and services to include:

CONTRACTOR shall provide staffing, at minimum, at the following locations.

Contractor agrees to continue to assist clients as needed at CHI's home office and agrees to increase staffing onsite if/when needed and in alignment with program goals:

- CSOA – Three (3) days a week at 650 Imperial Way, Napa, CA 94559
- Calistoga – Two (2) days a week at 1705 Washington St, Calistoga, CA 94515

CONTRACTOR services will include:

- I. Assist individuals in Medi-Cal Application or Renewal process. This assistance could be in person or over the phone, and as referred to by SSSD Staff.
- II. Follow up with pending applicants or beneficiaries who need assistance in obtaining required verifications to complete the Medi-Cal process as referred to by SSSD Staff.

- III. Contact individuals who are losing MAGI Medi-Cal or APTC due to the receipt of or pending receipt of Medicare as referred to by SSSD Staff.
- IV. Follow up with clients who are being discontinued from Medi-Cal due to Failure-to- Provide the month they are being discontinued or no later than the following month in order to provide the required documentation.
- V. Provide culturally appropriate services to the population served.
- VI. Conduct ongoing training, supervision, and quality assurance to ensure consistency and compliance with SSSD procedures and Medi-Cal regulations.
- VII. Hire and train staff with the skills and experience necessary to provide Medi-Cal outreach, enrollment, retention services and Public Health Emergency (PHE) efforts.

VI. CONTRACTOR shall ensure compliance with COUNTY Personal Identifiable Information (PII)

- i. CONTRACTOR staff will have limited access to the department's automated public assistance system (CalSAWS) in order to be able to look up case information and document contacts.
- ii. CONTRACTOR staff who have access to CalSAWS will be held to the same standards as COUNTY staff and will attend all mandated compliance and privacy trainings.
- iii. CONTRACTOR will ensure information regarding any client will not leave SSSD and all Personal Identifiable Information (PII) will be locked up at night. CONTRACTOR will ensure that staff will only access information on households referred to them by SSSD and only information that is needed to conduct business on behalf of this agreement.
- iv. COUNTY will be responsible for providing CONTRACTOR with all applicable policy and procedures and mandated trainings and provide necessary access

VII. CONTRACTOR will provide the following activities on an ongoing basis:

- a. Submit monthly reports to SSSD within five (5) working days after the end of each month. Reports will include:
 - i. Complete the monthly Data Collection Information per Navigator Tracking Report. Data to include:
 - Name of each person encountered/assisted including social security number, CIN#, Date of Birth, and address
 - Demographics of each person encountered/assisted including age, type of assistance, and target population

- ii. Submission of the data needs to be completed on the DHCS provided Excel Tracking Sheet. Transmission of information to SSSD shall be sent in a safe, password protected file.
 - iii. Invoices with supporting documentation.
 - iv. Other State Reporting as determined by SSSD
- b. Report on the outcome of the applications/renewals assisted.

VIII. CONTRACTOR will agree to and participate in site review/contract compliance visits with SSSD designated staff.

IX. CONTRACTOR will participate in quarterly or as needed meetings of CONTRACTOR and COUNTY staff to discuss the progress and participation of all referrals and activities. Expenditures to date and the need for possible contract amendments will be reviewed.

EXHIBIT "B-2"
MEDI-CAL NAVIGATOR PROJECT
COMPENSATION

The administrative compensation to be paid by COUNTY to CONTRACTOR for services required under this Agreement shall include various administrative costs.

Payment shall be made after the submission of an original invoice that includes copies of appropriate back-up documentation as requested.

Medi-Cal Navigators Project (AB 74)	Time Base	Approved Budget 7/1/20 – 12/31/21	Additional funding 1/1/22 – 6/30/22	Extension Period 07/01/22 – 09/30/22	Total Amount
Personnel Staff					
Program Director	0.05	\$4,250.00	\$1,500.00	\$ 1,291.78	\$7,041.78
Health Services Manager	0.1	\$3,600.00	\$1,700.00		\$5,300.00
Health Access Specialist	0.3	\$13,500.00	\$7,939.89		\$21,439.89
Health Access Assistors	1.25	\$39,907.00	\$3,000.00	\$ 26,400.00	\$69,307.00
-		\$	\$		
Benefits		\$19,602.09	\$4,524.75	\$ 7,199.86	\$31,326.70
Total Personnel Expenses		\$80,859.09	\$18,664.64	\$ 34,891.64	\$134,415.37
Non-Personnel – Direct Costs					
Rent		\$5,986.00	\$1,995.00	\$ 1,100.00	\$9,081.00
Utilities		\$980.00	\$326.00	\$ 163.00	\$1,469.00
Telephone		\$882.00	\$294.00	\$ 147.00	\$1,323.00
Internet		\$372.00	\$124.00	\$ 62.00	\$558.00
Equipment		\$ -			
-Outreach Material		\$1,830.00			\$1,830.00
Total Direct Costs		\$10,050.00	\$2,739.00	\$ 1,472.00	\$14,261.00
Non-Personnel – Indirect Costs					
Indirect		\$9,090.91	\$2,140.36	\$ 3,636.36	\$14,867.63
Total Indirect Costs		\$9,090.91	\$2,140.36	\$ 3,636.36	\$14,867.63

Total Personnel Expenses		\$80,859.09	\$18,664.64	\$ 34,891.64	\$134,415.37
Total Direct Costs		\$10,050.00	\$2,739.00	\$ 1,472.00	\$14,261.00
Total Indirect Costs @ 10%		\$9,090.91	\$2,140.36	\$ 3,636.36	\$14,867.63
Grand Total		\$100,000.00	\$23,544.00	\$ 40,000.00	\$163,544.00

With approval of Director of COUNTY's Health and Human Services Agency or designee, CONTRACTOR may modify the maximum amount of individual budget items as long as the dollar amount of any individual budget item is not reduced to less than 10% of its original amount, and the total dollar amount for all budget items remains unchanged.