



Napa County

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Legislation Details (With Text)

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On agenda: 2/7/2023 **Final action:** 12/31/2023

Title: Director of Health and Human Services Agency (HHS) requests approval of and authorization for the Chair to sign Revenue Agreement No. 230298B with Department of Health Care Services (DHCS) for a maximum of \$620,000, for the term October 1, 2022, through June 30, 2025, for the Medi-Cal Health Enrollment Navigators Project (Navigators Project), and to sign Agreement No. 230297B with Community Health Initiative Napa County, Inc. (CHI), for a new maximum of \$499,697, for the term upon approval through June 30, 2025, to utilize this Revenue Agreement from DHCS.

Sponsors:

Indexes:

Code sections:

Attachments: 1. DHCS Agreement, 2. CHI Agreement

Date	Ver.	Action By	Action	Result
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TO: Board of Supervisors

FROM: Jennifer Yasumoto, Director Health and Human Services Agency

REPORT BY: Summer Isham, Contracts Supervisor

SUBJECT: Revenue Agreement No. 230298B with Department of Health Care Services and Agreement No. 230297B with Community Health Initiative Napa County, Inc. (Medi-Cal Health Enrollment Navigators Project)

RECOMMENDATION

Director of Health and Human Services Agency (HHS) requests approval of and authorization for the Chair to sign Revenue Agreement No. 230298B with Department of Health Care Services (DHCS) for a maximum of \$620,000, for the term October 1, 2022, through June 30, 2025, for the Medi-Cal Health Enrollment Navigators Project (Navigators Project), and to sign Agreement No. 230297B with Community Health Initiative Napa County, Inc. (CHI), for a new maximum of \$499,697, for the term upon approval through June 30, 2025, to utilize this Revenue Agreement from DHCS.

EXECUTIVE SUMMARY

Approval of today's actions will:

1. Approve a Revenue Agreement with DHCS to expend funding for the Navigators Project services and activities pursuant to SB 154; and
2. Approve an Agreement with CHI to utilize the funding provided in the Revenue Agreement from DHCS for continued Medi-Cal Outreach & Enrollment.

FISCAL & STRATEGIC PLAN IMPACT

Is there a Fiscal Impact?	Yes
Is it currently budgeted?	Yes
Where is it budgeted?	Health & Human Services, Self Sufficiency Services Division
Is it Mandatory or Discretionary?	Discretionary
Discretionary Justification:	There is no mandate to enter these agreements but doing so helps to fulfill the goals of HHSA in reaching the most vulnerable in our community.
Is the general fund affected?	No
Future fiscal impact:	These Agreements contain a provision for automatic annual renewal, until June 30, 2025. Appropriations have been included in the approved Fiscal Year 2022-2023 budget and the two future fiscal years will be budgeted accordingly.
Consequences if not approved:	If these agreements are not approved, Napa County will be unable to utilize this funding, and our abilities to provide services to vulnerable populations will be reduced.
County Strategic Plan pillar addressed:	Healthy, Safe, and Welcoming Place to Live, Work, and Visit

ENVIRONMENTAL IMPACT

ENVIRONMENTAL DETERMINATION: The proposed action is not a project as defined by 14 California Code of Regulations 15378 (State CEQA Guidelines) and therefore CEQA is not applicable.

BACKGROUND AND DISCUSSION

HHSA's Self Sufficiency Services Division (SSSD) will utilize this Revenue Agreement with DHCS to fund this proposed agreement with CHI. CHI will utilize the Navigators Project funds to assist individuals with completing applications and renewals at onsite and outreach locations.

Senate Bill (SB) 154 authorized the Department of Health Care Services (DHCS) to manage and fund Medi-Cal navigation efforts, such as, outreach, enrollment, retention and application assistance to continue support activities associated with the AB 74 - Health Navigators Project. The funds for the previous AB 74 ended September 30, 2022. Additional funds were approved for State Fiscal Years 2022-26 through SB 154.

The new allocation also provides for efforts towards the Public Health Emergency (PHE) unwinding efforts.

Under the Continuous Coverage Requirement in the Families First Coronavirus Response Act (FFCRA), all states are required to maintain enrollment of nearly all Medi-Cal enrollees through the end of the month in which the PHE ends. The PHE is set to end on March 31, 2023. This means that there will be a greatly increased workload in outreach and eligibility determinations for current Medi-Cal enrollees. DHCS anticipated this “Continuous Coverage Unwinding” period and sought to alleviate the burden on counties with a suddenly increased caseload with this additional allocation.

HHSA’s SSSD is receiving an allocation of \$620,000 from DHCS for the purpose of outreach, enrollment, application assistance and retention of thirteen targeted populations. The grant funding is effective October 1, 2022 through June 30, 2025. This allocation fund will be used for existing staff, and this proposed contract with CHI. As a condition of the grant funding, the County is required to collaborate with one or more CBOs to develop, conduct and implement effective tools and methods to expand Medi-Cal outreach, application assistance, increase Medi-Cal enrollment and contribute efforts to retention for the uninsured, targeting thirteen populations: Persons with mental health disorders; Persons with substance use disorders; Persons with other disabilities; Aged persons; Homeless persons; Young people of color; Immigrants & families of mixed immigration status; Persons with limited English proficiency; Low-wage workers and their families and dependents; Uninsured children or youth formerly enrolled in Medi-Cal; Persons who are in county jail or state prison, on state parole, on county probation, or under post release community supervision; Low wage workers; and Students. CHI previously fulfilled the CBO requirement under the Navigators Project funds distributed under AB 74.

HHSA’s SSSD and CHI aim to improve and increase the outreach, application assistance, enrollment and retention efforts and reach uninsured county residents who may be eligible to Medi-Cal, with a focus on these hard-to-reach targeted populations.