

THIS AMENDMENT, entered into between Senior Connection Center, Inc., hereinafter referred to as the "agency" and Manatee County, a political subdivision of the State of Florida, hereinafter referred to as the "subrecipient", amends Contract No. HCE-19/20-MAN.

The purpose of this amendment is to:

- 1) amend Attachment I, Section 5, Statement of Purpose;
- 2) amend Attachment I, Section 9, Individuals to be Served;
- 3) amend Attachment I, Section 12(2)(a), Specific Service Tasks;
- 4) amend Attachment I, Section 13, Delivery of Service to Eligible Clients;
- 5) amend Attachment I, Section 19(4), Performance Outcome Measurements;
- 6) amend Attachment I, Section 23, Financial Consequences for a Contract Surplus; and
- 7) revise and replace ATTACHMENT III, Budget Summary, to include fixed rates for Special Subsidies.

1. **ATTACHMENT I**, Section 5, is hereby amended to read:

5. Statement of Purpose

The purpose of the HCE program is to assist caregivers of three (3) or fewer elders, living in private homes, through the provision of a Basic Subsidy for maintenance and supervision, as reimbursement for some of their expenses each month for caring for the client(s). Caregivers may also receive a Special Subsidy for other necessary services and essential supplies.

2. **ATTACHMENT I**, Section 9, is hereby amended to read:

9. Individuals to be Served

Clients eligible to receive services under this contract must meet the following requirements in accordance with Rule 58H-1.005, F.A.C.:

- (1) Be at least 60 years of age or older;
- (2) Be a current resident of the State of Florida with the intent to remain in the state; and
- (3) Meet the criteria for functional and financial eligibility set forth below:
 - (a) Be at risk of nursing home placement based on a DOEA 701 B assessment, and
 - (b) Have a self-declared income and assets which do not exceed the ICP limits established by Medicaid and DCF, or
 - (c) Receive Supplemental Security Income (SSI), or
 - (d) Receive benefits as a Qualified Medicare Beneficiary (QMB) or as a Special Low-Income Medicare Beneficiary (SLMB); and
 - (e) Have an approved caregiver who meets the caregiver requirements pursuant to Rule 58H-1.006, F.A.C., and the dwelling requirements pursuant to Rule 58H-1.007, F.A.C.
- (4) Be aging out, as defined in **ATTACHMENT I, Section 2(1)**, of this contract.
- (5) The department shall have final authority for the determination of client eligibility.

Caregivers eligible to receive services under this contract must meet the following requirements:

- (1) Be at least 18 years of age;
- (2) Be capable of providing a family-type living environment for the home care client/recipient;
- (3) Be a relative or a friend who has been accepted by the client as a surrogate family, or is a responsible adult with whom the client has made an arrangement to provide home care services;
- (4) Be willing to accept responsibility for the social, physical and emotional needs of the home care client/recipient;
- (5) Be physically present and live in the home to provide supervision and to assist in arrangement of

services for the client;

- (6) Maintain the residential dwelling free of conditions that pose an immediate threat to the life, safety, health and well-being of the home care client in accordance with Rule 58H-1.007, F.A.C.; and
- (7) Be without record of conviction of abuse, neglect or exploitation of another person.

3. **ATTACHMENT I**, Section 12(2)(a), is hereby amended to read:

(a) Imminent Risk individuals whose mental or physical health condition has deteriorated to the degree that self-care is not possible, there is no capable caregiver, and nursing home placement is likely within one (1) month or very likely within three (3) months.

4. **ATTACHMENT I**, Section 13, is hereby amended to read:

13. Delivery of Service to Eligible Clients

Through intake, case management and case aide services, the HCE client's needs are documented and needed services are planned, arranged and coordinated for the client.

(1) **Basic Subsidies:** The subrecipient shall ensure that the Basic Subsidy is a cash payment of at least \$160.00 made to an approved caregiver each month to reimburse expenses incurred in caring for the client, as detailed herein and in the current DOEA Programs and Services Handbook. The subrecipient shall further ensure that existing clients receiving a subsidy greater than \$160.00 as of October 24, 2018, continue to receive the higher subsidy as specified in the agency's NOI #030119 issued March 1, 2019, and incorporated herein by reference. The basic subsidy is provided for support and maintenance of the home care client/recipient, including housing, food, clothing, and medical costs not covered by Medicaid, Medicare or any other insurance. A basic subsidy shall be paid to authorized caregivers when the client is in the home for any part of the month.

(2) **Special Subsidy Services:** Though every eligible HCE client receives a basic subsidy, special subsidy payments are pre-authorized and are based on additional specialized medical or health care services, supplies or equipment needed to maintain the health and well-being of the individual elder. The special subsidy for additional medical support and special services is a cash payment to reimburse the costs of any other service or special care not covered by Medicaid, Medicare, or private insurance when these services are determined to be essential to maintain the well-being of the home care client/recipient. A special subsidy shall be paid to authorized caregivers when the client is in the home for any part of the month. Special Subsidy Services may be authorized through a vendor agreement. All special subsidy services must be performed in accordance with the department's current Programs and Services Handbook. Special subsidy services include:

- (a) Adult Day Care
- (b) Adult Day Health Care
- (c) Caregiver Training/Support
- (d) Chore
- (e) Chore (Enhanced)
- (f) Counseling (Gerontological)
- (g) Counseling (Mental Health/Screening)
- (h) Home Delivered Meals
- (i) Home Health Aide Service
- (j) Homemaker
- (k) Housing Improvement
- (l) Material Aid
- (m) Occupational Therapy
- (n) Other

- (o) Personal Care
- (p) Physical Therapy
- (q) Respite (Facility Based or In-Home)
- (r) Skilled Nursing Services
- (s) Specialized Medical Equipment, Services and Supplies
- (t) Speech Therapy
- (u) Transportation

5. **ATTACHMENT I**, Section 19(4), is hereby amended to read:

(4) The performance of the subrecipient in providing the services described in this contract shall be measured by the current SPA strategies for the following criteria:

- (a) Percentage of most frail elders who remain at home or in community instead of going into a nursing home;
- (b) Percentage of active clients eating two or more meals per day;
- (c) Percentage of new service recipients whose ADL assessment score has been maintained or improved;
- (d) Percentage of new service recipients whose IADL assessment score has been maintained or improved;
- (e) After service intervention, the percentage of caregivers who self-report being very confident about their ability to continue to provide care;
- (f) Percentage of clients who are at imminent risk of nursing home placement who are served with community-based services; and
- (g) Percentage of elders assessed with high or moderate risk environments who improved their environment score.

6. **ATTACHMENT I**, Section 23, is hereby amended to read:

23. Financial Consequences for a Contract Surplus

The subrecipient shall ensure the provision of services to the projected number of clients in accordance with the subrecipient's SPA, and any revisions thereto approved by the agency, and within the contract amount. The subrecipient shall ensure expenditure of 100% of the contract amount budgeted for services to clients at the unit rates established in the subrecipient's SPA. In the event the subrecipient has a surplus of 1% or more at the end of the contract term, the agency may reallocate 1% of the budget for the next contract term to other providers found to be serving clients to the fullest extent of their allocated budgets. If there is a conflict between this paragraph and the Financial Consequences of Non-Performance paragraph in the Master Contract, this paragraph shall have precedence.

7. **ATTACHMENT III**, Budget Summary, is hereby replaced with the revised **ATTACHMENT III**, Budget Summary, attached hereto.

This amendment shall be effective on the last date that the amendment is signed by both parties.

All provisions in the contract and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform with this amendment.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the contract.

This amendment and all its attachments are hereby made a part of the contract.

IN WITNESS WHEREOF, the parties hereto have caused this 5 page amendment to be executed by their officials thereunto duly authorized.

**SUBRECIPIENT: Manatee County,
a political subdivision
of the State of Florida**

AGENCY: Senior Connection Center, Inc.

SIGNED
BY: _____

NAME: Stephen R. Jonsson

TITLE: Chairman

DATE: _____

FEDERAL ID NUMBER: 59-6000727

SUBRECIPIENT FISCAL YEAR END DATE: 9/30

SIGNED
BY: _____

NAME: Lilly Ho Pehling

TITLE: Chair, Board of Directors

DATE: _____

ATTEST: Angelina Colonnese
Clerk of the Circuit Court

By: _____

ATTACHMENT III

BUDGET SUMMARY

Provider: Manatee County Neighborhood Services Department

Program: Home Care for the Elderly

Period for Delivery of Services: July 1, 2019 - June 30, 2020

Service	Total Amount	Units of Service	Unit Rate	Undupl Clients
HCE Spending Authority:				
Total Amount not to exceed	\$ 77,836.00			
Authorized services and rates:				
Case Management (CMV)	\$ -	-	\$ 59.43	-
Basic Subsidies (BASI)	\$ -	-	Cost Reimb.	-
Spec.Med.Equip.Srv.Supp.(SCSM)	\$ -	-	Cost Reimb.	-
	\$ -	-	\$ 0.00	-
	\$ -	-	\$ 0.00	-
	\$ -	-	\$ 0.00	-
	\$ -	-	\$ 0.00	-
	\$ -	-	\$ 0.00	-
	\$ -	-	\$ 0.00	-
TOTAL HCE Funding	\$ 77,836.00			
Add: Cash Match	\$ -			
Add: In-Kind Match	\$ -			
Add: Co-Pay Used as Match	\$ -			
Add: Co-Pay Not Used as Match	\$ -			
Add: Non-Match Other Resources	\$ 2,873.00			
TOTAL HCE Budget	\$ 80,709.00			