33184

DEPARTMENT OF PUBLIC HEALTH CHILDREN'S HEALTH OUTREACH, ENROLLMENT, UTILIZATION AND RETENTION SERVICES

Amendment No. 2

THIS	AMENDMENT is mad	le and entered into this 1st	
day of	July	, 2014,	
by and	d between	COUNTY OF LOS ANGELES (hereafter "County"),	
and		CITY OF LONG BEACH DEPART HEALTH AND HUMAN SERVICE (hereafter "Contractor").	

WHEREAS, reference is made to that certain document entitled "Children's Health Outreach, Enrollment, Utilization and Retention Services", dated June 4, 2013, and further identified as Contract No. PH-002508, and any Amendments thereto (all hereafter "Contract"); and

WHEREAS, on June 10, 2014, County's Board of Supervisors approved amending this Contract to increase funding for the provision of Medi-Cal outreach, enrollment, and retention services for residents newly eligible under the Affordable Care Act; and

WHEREAS, it is the intent of the parties hereto to amend Contract to increase the maximum obligation of County and make other hereafter designated changes; and

WHEREAS, said Contract provides that changes may be made in the form of a written amendment which is formally approved and executed by the parties.

NOW, THEREFORE, the parties hereto agree as follows:

1. This Amendment shall be effective on July 1, 2014.

2. Paragraph 2, <u>DESCRIPTION OF SERVICES</u>, Subparagraph A, shall be revised to read as follows:

"A. Contractor shall provide services in the manner described in Exhibit A.1 (Statement of Work) and Exhibit B (Scope(s) of Work identified as Exhibits B-1, B-2.1, and B-3), attached hereto and incorporated herein by reference."

3. Paragraph 3, <u>TERM OF CONTRACT</u>, shall be revised to read as follows:

"3. TERM OF CONTRACT:

The term of this Contract shall be effective July 1, 2013 and shall continue in full force and effect through June 30, 2016, unless sooner terminated or extended, in whole or in part, as provided in this Contract.

In any event, this Contract may be canceled or terminated at any time by either party, with or without cause, upon the giving of at least thirty (30) calendar days' prior written notice to the other. Further, County may also suspend the performance of services hereunder, in whole or in part, upon the giving of at least thirty (30) calendar days' advance written notice to Contractor. County's notice shall set forth the extent of the suspension and the requirements for full restoration of the performance obligations.

Notwithstanding any other provision of the Paragraph, the failure of Contractor or its officers, employees, or agents to comply with any of the terms of this Contract or any written directions by or on behalf of County issued pursuant hereto, shall constitute a material breach hereto, and this Contract may be terminated by County immediately. County's failure to exercise this right to termination shall not constitute a waiver of such right, which may be exercised at any subsequent time.

The Contractor shall notify Department when this Contract is within six (6) months from the expiration of the term as provided for hereinabove. Upon occurrence of this event, the Contractor shall send written notification to Department at the address herein provided in Paragraph 21 NOTICES."

4. Paragraph 4, <u>MAXIMUM OBLIGATION OF COUNTY</u>, shall be revised to read as follows:

"4. MAXIMUM OBLIGATION OF COUNTY:

- A. Effective July 1, 2013 through June 30, 2014, the maximum obligation of County for all services provided hereunder shall not exceed One Hundred Seventy-Six Thousand, Five Hundred Fourteen Dollars (\$176,514), as set forth in Exhibit C-1, attached hereto and incorporated herein by reference.
- B. Effective July 1, 2014 through June 30, 2015, the maximum obligation of County for all services provided hereunder shall not exceed Two Hundred Fourteen Thousand, Forty-Two Dollars (\$214,042), as set forth in Exhibits C-2 and C-3, attached hereto and incorporated herein by reference.
- C. Effective July 1, 2015 through June 30, 2016, the maximum obligation of County for all services provided hereunder shall not exceed Thirty-Seven Thousand, Five Hundred Twenty-Eight Dollars (\$37,528), as set forth in Exhibit C-4 attached hereto and incorporated herein by reference.
- D. Contractor shall use such funds only to pay for CHOEUR contract budgeted expenses as set forth in the Exhibit C attached hereto, and only to the extent that such funds are reimbursable to the County.
- E. The Contractor shall not be entitled to payment or reimbursement for any tasks or services performed, nor for any incidental or administrative expenses

whatsoever incurred in or incidental to performance hereunder, except as specified herein. Assumption or takeover of any of the Contractor's duties, responsibilities, or obligations, or performance of same by any entity other than the Contractor, whether through assignment, delegation, merger, buyout, or any other mechanism, with or without consideration for any reason whatsoever, shall occur only with the County's express prior written approval.

- F. The Contractor shall maintain a system of record keeping that will allow the contractor to determine when it has incurred seventy-five percent (75%) of the total contract authorization under this Contract. Upon occurrence of this event, the Contractor shall send written notification to the Department at the address herein provided under Paragraph 21, Notices.
- G. No Payment for Services Provided Following Expiration/Termination of
 Contract: The Contractor shall have no claim against County for payment of any
 money or reimbursement, of any kind whatsoever, for any service provided by the
 Contractor after the expiration or other termination of this Contract. Should the
 Contractor receive any such payment it shall immediately notify County and shall
 immediately repay all such funds to County. Payment by County for Services
 rendered after expiration/termination of this Contract shall not constitute a waiver of
 County's right to recover such payment from the Contractor. This provision shall
 survive the expiration or other termination of this Contract."
- 5. Paragraph 59, <u>TIME OFF FOR VOTING</u>, shall be added to the ADDITIONAL PROVISIONS to read as follows:
 - "59. <u>TIME OFF FOR VOTING:</u> The Contractor shall notify its employees, and shall require each subcontractor to notify and provide to its employees, information

regarding the time off for voting law (Election Code Section 14000). Not less than 10 days before every statewide election, every Contractor and subcontractors shall keep posted conspicuously at the place of work, if practicable, or elsewhere where it can be seen as employees come or go to their place of work, a notice forth the provisions of Section 14000."

6. Paragraph 60, <u>WHISTLEBLOWER PROTECTIONS</u>, shall be added to the ADDITIONAL PROVISIONS to read as follows:

"60. WHISTLEBLOWER PROTECTIONS:

A. Per statute 41 United States Code (U.S.C.) 4712, all employees working for contractors, grantees, subcontractors, and subgrantees on federal grants and contracts are subject to whistleblower rights, remedies, and protections and may not be discharged, demoted, or otherwise discriminated against as a reprisal for whistleblowing. In addition, whistleblowing protections cannot be waived by any agreement, policy, form, or condition of employment.

B. Whistleblowing is defined as making a disclosure "that the employee reasonably believes" is evidence of any of the following: gross mismanagement of a federal contract or grant; a gross waste of federal funds; an abuse of authority relating to a federal contract or grant; a substantial and specific danger to public health or safety; or a violation of law, rule, or regulation related to a federal contract or grant (including the competition for, or negotiation of, a contract or grant). To qualify under the statue, the employee's disclosure must be made to: a member of Congress, or a representative of a Congressional committee; an Inspector General; the Government Accountability Office; a federal employee responsible for contract or grant oversight or management at the relevant agency; an official from the Department of Justice, or other law enforcement agency; a court or grand jury; or a

management official or other employee of the contractor, subcontractor, grantee, or subgrantee who has the responsibility to investigate, discover, or address misconduct.

- C. The National Defense Authorization Act for fiscal year 2013, enacted January 2, 2013, mandates a Pilot Program for Enhancement of Contractor Employee Whistleblower Protections that requires that all grantees, their subgrantees, and subcontractors: to inform their employees working on any federal award that they are subject to the whistleblower rights and remedies of the pilot program; to inform their employees in <u>writing</u> of the employee whistleblower protections under statute 41 U.S.C. 4712 in the predominant native language of the workforce; and, contractors and grantees shall include such requirements in any agreement made with a subcontractor or subgrantee."
- 7. Effective on the date of this Amendment, Exhibit A shall be replaced with Exhibit A.1, attached hereto and incorporated herein by reference.
- 8. Effective on the date of this Amendment, wherever "Exhibit A" referenced in this Contract it shall now be referred to as "Exhibit A.1".
- 9. Effective on the date of this Amendment, Exhibit B-2 shall be replaced with Exhibit B-2.1, attached hereto and incorporated herein by reference.
- 10. Effective on the date of this Amendment, Exhibits B-3, C-3, and C-4 shall be attached hereto and incorporated herein by reference.
- 11. Except for the changes set forth herein above, Contract shall not be changed in any respect by this Amendment.

,

/

1

IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by its Director of Public Health, and Contractor has caused this Amendment to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

COUNTY OF LOS ANGELES

By Change A Hardy Monathan E. Fielding, M.D. M.P.H. Director and Health Officer

City of Long Beach Department of Health and Human Services

Contractor

Assistant City Manager

Signature

EXECUTED PURSUANT TO SECTION 301 OF THE CITY CHARTER.

Patrick H. West

Printed Name

Title City Manager_

(AFFIX CORPORATE SEAL)

APPROVED AS TO FORM
BY THE OFFICE OF THE COUNTY COUNSEL
JOHN F. KRATTLI
County Counsel

DEPUTY CITY ATTORNEY

APPROVED AS TO CONTRACT ADMINISTRATION:

Department of Public Health

APPROVED AS TO FORM

Patricia Gibson, Chief

Contracts and Grants Division

#02832

By

The City of Long Beach Department of Health and Human Services STATEMENT OF WORK

Children's Health Outreach, Enrollment, Utilization and Retention (CHOEUR) Services First 5 LA Grant and

DHCS Medi-Cal Outreach and Enrollment Grant

1. DEFINITION Children's Health Outreach, Enrollment, Utilization and Retention (CHOEUR) are comprehensive programs that: develop and utilize a variety of techniques for health coverage outreach and enrollment; provide individual assessments of health coverage eligibility; develop and utilize a variety of techniques to reduce barriers to health coverage enrollment and utilization of benefits; and implement strategies to support health coverage retention. The delivery format of such programs may include, but is not limited to: community outreach and education, presentations, enrollment events, eligibility assessment, application assistance, enrollment verification, utilization assistance and assistance with redetermination.

2. PERSONS TO BE SERVED

- A. CHOEUR services shall be provided in Los Angeles County.
- B. Contractor shall provide services to uninsured children, families and individuals in Los Angeles County who may be eligible for Medi-Cal, Healthy Kids and other no/low-cost health coverage programs (in accordance with Exhibits **B-1,B-2.1**, and **B-3**, Scope(s) of Work, attached hereto and incorporated herein by reference).
- C. CHOEUR services shall be provided to individuals who may be eligible for Medi-Cal, Healthy Kids or other no/low-cost health coverage programs who reside in the City of Long Beach of Los Angeles County.
- 3. SERVICE DELIVERY SITE(S)

Contractor's facility(ies) where services are to be provided hereunder are located at:

2525 Grand Avenue, Long Beach, CA 90815. Greater Long Beach Area

For purposes of this Contract, Contractor shall specify specific cross streets and locations for street outreach activities in monthly reports to the Department of Public Health (DPH). Contractor shall request approval from DPH in writing a minimum of thirty (30) days before terminating services at such location(s) and/or before commencing services at any other location(s).

4. SERVICES TO BE PROVIDED

- A. Contractor shall provide CHOEUR services in accordance with procedures formulated and adopted by Contractor's staff, consistent with law, regulations, and the terms of this Contract. Additionally, Contractor shall provide such services as described in Exhibits **B-1**, **B-2.1**, and **B-3**, Scope(s) of Work, attached hereto and incorporated herein by reference.
- B. Contractor shall obtain written approval from DPH's authorized designee for all educational materials utilized in association with this Contract prior to its implementation.
- C. Contractor shall develop all publicity materials in a professional manner and submit for approval such materials to DPH at least thirty (30) days prior to the projected date of implementation. For the purposes of this Contract, materials may include, but are not limited to, written educational materials (e.g., curricula, pamphlets, brochures, fliers), audiovisual materials (e.g., films, videotapes), and pictorials (e.g., posters and similar educational materials using photographs, slides, drawings, or paintings).
- D. Failure of Contractor to abide by this requirement may result in Termination for Default as specified in Paragraph 47 of the ADDITIONAL PROVISIONS of this Contract.
- E. Contractor shall utilize funds received from County for the sole purpose of providing CHOEUR services in accordance with Exhibits C-1, C-2, C-3, and C-4, Schedule(s).

STAFFING REQUIREMENTS

- A. Contractor shall recruit linguistically and culturally appropriate staff. For the purposes of this Contract, staff shall be defined as paid and volunteer individuals providing services as described in Exhibits **B-1**, **B-2.1**, and **B-3**, Scope(s) of Work, attached hereto and incorporated herein by reference.
- B. Contractor shall maintain recruitment records, to include, but not be limited to:
 1) job description of all positions funded under this Contract; 2) staff résumé(s);

3) appropriate degrees and licenses; and 4) biographical sketch(es) as appropriate.

In accordance with this Contract, if during the term of this Contract an executive director, program director, or a supervisorial position becomes vacant, Contractor shall notify DPH's authorized designee in writing prior to filling said vacancy.

STAFF DEVELOPMENT AND TRAINING

Contractor shall conduct ongoing and appropriate staff development and training as described in the Scope of Work, attached hereto and incorporated herein by reference.

- A. Contractor shall provide and/or allow access to ongoing staff development and training of CHOEUR staff. Staff Development and training shall include, but not be limited to, DPH approved CORE Comprehensive Training, which includes training on Medi-Cal Programs, and periodic health coverage program reviews and updates. Contractor shall ensure that all newly hired staff receive the aforementioned training within sixty (60) days of hire.
- B. Contractor shall maintain documentation of staff training in each employee file to include, but, not be limited to: 1) date, time, and location of staff training; 2) name of trainer and title, and training topic(s); 3) and names of attendees and titles.
- C. Contractor shall document training activities in the monthly report to DPH.

7. DPH CHOI DATA SYSTEM

Contractor shall enter data on program participants into the DPH Internet-based data tracking and reporting system. "Enter" is defined as: directly entering required data elements into the DPH data system. Contractor/Subcontractor staff using the DPH CHOI data tracking and reporting system will be given a user identification and password to ensure the security of the system and the confidentiality of client records. In the event that an agency staff person terminates employment with the CHOEUR, Contractor/Subcontractor must delete the user account immediately. In the event that an agency staff person at the administrative level terminates employment with the CHOEUR, Contractor must contact DPH immediately so that DPH can delete this administrative account and assign a new administrative account.

8. PROPRIETARY CONSIDERATIONS

A. County and Contractor agree that aggregated, non-identifying client data and other materials and information developed and or modified under this Contract

- may be used by either Contractor or County both during and subsequent to the term of this Contract.
- B. County and Contractor agree to protect the security of all data, materials, and information developed and or produced under this Contract. Further, County and Contractor agree to use best efforts to protect all such data, materials, and information from loss or damage by any cause, including, but not limited to, fire and theft.

9. REPORTS

Subject to the reporting requirements of the REPORTS Paragraph of the ADDITIONAL PROVISIONS of this Contract attached hereto, Contractor shall submit the following report(s):

- A. Monthly Report: Contractor shall generate a monthly report using the DPH data system and submit this monthly report to DPH no later than fifteen (15) days after the end of each calendar month. Monthly reports shall clearly reflect all required information as specified on the monthly report form provided by DPH or specified report as requested by DPH.
- B. Quarterly Reports: Contractor shall submit to DPH a quarterly report within the time period as directed for each quarter. Quarterly reports shall include all the required information and be completed in the correct format.
- C. Annual Report: Contractor shall submit to DPH an annual report within the time period as directed for each year. Annual reports shall include all the required information and be completed in the correct format.
- D. Any additional reports as required by the Department of Health Care Services Medi-Cal Outreach and Enrollment Grant, if applicable.

10. ANNUAL TUBERCULOSIS SCREENING FOR STAFF

Prior to employment or provision of services hereunder, and annually thereafter, Contractor shall obtain and maintain documentation of tuberculosis screening for each employee, volunteer, and consultant providing face-to-face client services hereunder. Such tuberculosis screening shall consist of tuberculin skin test (Mantoux test) and/or written certification by a physician that the person is free from active tuberculosis based on a chest x-ray.

11. QUALITY IMPROVEMENT

Contractor shall develop and submit to DPH within ninety (90) days of the execution of this Contract its written Quality Improvement (QI) Plan. The QIP shall describe a process for ensuring continual progress toward measurable objectives, client satisfaction, and success of outreach, enrollment, utilization, and retention services.

12. MEDI-CAL ADMINISTRATIVE ACTIVITIES (MAA)

Contractor shall perform Medi-Cal administrative activities on behalf of Los Angeles County to assist in the proper and efficient administration of the Medi-Cal Program by improving the availability and accessibility of Medi-Cal Services to Medi-cal eligible and potentially eligible individuals and their families. These activities include outreach, facilitating Medi-Cal application, and program planning and policy development. Contractor shall attend mandatory MAA time survey training sessions. Contractor shall complete and submit time surveys and maintain all records to support claim (e.g. CHOI forms, data system printouts, agendas, event summaries, and DPH approved outreach and health education materials) as required by DPH.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

Goal: To increase access to health care by assisting children, families and individuals in Los Angeles county to enroll in health coverage programs and utilize and retain these benefits.

Note: All materials listed under implementation activities and documentation must be kept on file and available for random sampling and auditing by DPH.

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
* Service Planning Area(s) must be specified			-
1.1 By June 30, 2015, for the First 5 LA Grant, Contractor (and subcontractor) will have successfully engaged a minimum of 5,000 of the target population in the City of Long Beach through an outreach/in-reach contact. For Agencies w/ Subcontractors, specify target & SPAs: First 5 LA Grant Agency Name SPA(s) Numbers City of Long Beach Citywide 5,000	1.1a Develop, or review and revise, outreach protocol including: outreach contact forms/event summary sheets, sign-in sheets, and educational materials. Outreach and educational materials shall be culturally and linguistically appropriate and include information regarding Medi-Cal, Healthy Families and other no or low-cost health programs. Submit to County of Los Angeles Department of Public Health (DPH) for approval.	8/1/14- 6/30/15	1.1a DPH letters of approval and materials will be kept on file.
Total (Must equal F5LA total above) 5,000	1.1b Schedule outreach and maintain a list or calendar of sites, dates, and times.	7/1/14- 6/30/15	1.1b Documents will be kept on file and summary of events will be submitted with monthly reports to DPH
By June 30, 2015, for the DHCS Grant, Contractor will have engaged a minimum 1,000 of the Medi-Cal eligible target population in the City of Long Beach. DHCS Grant	1.1c Conduct outreach at events (e.g., presentations, fairs, etc.) and complete event summaries. Event summaries to include site, date, name of	7/1/14- 6/30/15	Completed documents will be kept on file and number of participants will be reported to DPH in monthly reports.
Agency Name SPA(s) Medi-Cal Numbers City of Long Beach Citywide 1000	outreach worker(s), flyers, number of individuals contacted, sign-in sheets, if appropriate, and materials presented.		
Oity of Long Boach Oity Wildon 1000	1.1d Conduct outreach (e.g., telephone outreach,	7/1/14-	1.1d Completed documentation will be kept
Total (Must equal DHCS total above) 1000	walk-ins, etc.) and maintain contact documentation including but not limited to: sites, dates, name of outreach worker(s), number of individuals contacted, family name/identifier.	6/30/15	on file and number of participants will be reported to DPH in monthly reports.
	1.1e Enter documentation of outreach numbers into CHOI database.	7/1/14- 6/30/15	1.1e Data system will be queried to generate outreach numbers.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

Goal: To increase access to health care by assisting children, families and individuals in Los Angeles county to enroll in health coverage programs and utilize and retain these benefits. Note: All materials listed under implementation activities and documentation must be kept on file and available for random sampling and auditing by DPH.

"Successfully engaged" is defined as having documented agency outreach contacts (see Implementation Activities 1.1d and Methods of Evaluating Objectives 1.1c)

An "outreach or in-reach contact" is defined as speaking directly either in person or by telephone with a client or potential client(s) for at least eight (8) minutes to publicize available health care options and services. Outreach contacts may include education, promotion, presentations, and informational activities and may be to individuals or groups of people who may be clients, potential clients or personnel with access to potential clients (school staff, WIC sites, CBO staff, etc.). Contractor must ensure to not limit outreach activities within own agency/clinic but rather provide appropriate comprehensive outreach efforts outside of own agency to ensure that proposed geographic areas/SPA(s) are targeted accordingly and maximize all outreach opportunities to low income families and their children.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
* Service Planning Area(s) must be specified 2.1 June 30, 2015, for the F5LA Grant, Contractor (and subcontractor) will have completed applications for a minimum of 1,000 clients citywide for Healthy Kids, Medi-Cal, Kaiser Child Health Plan and other no/low cost plans. Contractor will also provide clients with referrals to appropriate health programs or health agencies	2.1a Develop, or review and revise, enrollment protocol. Submit to DPH for approval.	8/1/13- 6/30/14	2.1a DPH letters of approval and materials will be on file.
F5LA Grant Agency Name City of Long Beach Citywide Citywide 1,000 Total (Must equal F5LA total above) By June 30, 2015, for the DHCS Grant, Contractor (and subcontractor) will have completed Medi-Cal applications for a minimum of 200 eligible clients within SPAs X and X. For Agencies with Subcontractors, specify target and Service Planning Area(s). DHCS Grant	2.1b Conduct enrollment activities utilizing DPH approved client intake form.	7/1/14- 6/30/15	2.1b Completed materials (i.e. client intake and enrollment documents) will be kept on file and number of participants documented in monthly reports to DPH. Printed documents of electronically submitted applications will be made available upon DPH request.
Agency Name SPA(s) Medi-Cal Numbers City of Long Beach Citywide 200 Total (Must equal DHCS total above) 200	2.1c Enter data from DPH approved forms into CHOI data system utilizing appropriate codes.	7/1/14- 6/30/15	2.1c For monthly reports, DPH data system will be queried to generate number of applications submitted.
	2.1d Develop, or review and revise, referral protocol and submit to DPH for approval.	8/1/14- 6/30/15	2.1d DPH letters of approval on file.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

"Completed applications" is defined as assisting clients to fill out health insurance applications line-by-line, through in-person, telephone assistance or electronic submission. It may also be defined as providing in-depth assistance (troubleshooting) toward facilitating enrollments for clients whose applications were unsuccessfully completed by another agency or DPSS.	Screen and refer clients for appropriate services. Document referral information with appropriate codes on client intake form or appropriate DPH approved forms.	7/1/14- 6/30/15	Maintain client intake forms with services/program referral information.
"Referrals" are defined as referring clients in person or by telephone for services to other health programs (i.e. Healthy Way LA, CCS, Community Partners, Health Benefit Exchange, DPH, early detection programs, legal services for health issues, etc.). Does not include referrals for shelter, food, and other non-direct medical needs.			

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

MEASURABLE OBJECTIVE(S)		IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
2.2 By June 30, 2015, Contractor (and subcontractor) will have investigated enrollment status within three months of application completion date on a	2.2a	Develop, or review and revise, enrollment verification protocol. Submit to DPH for approval.	8/1/14— 6/30/15	2.2a Letter(s) of DPH approval and materials will be kept on file.
minimum of 100% of clients for whom agency assisted with or facilitated applications as measured in Objective 2.1.	2.2b	Conduct enrollment verification and troubleshooting using DPH approved enrollment verification and troubleshooting forms.	7/1/14— 6/30/15	2.2b Completed client enrollment verification and troubleshooting forms/reports will be kept on file.
"Investigated enrollment status" is defined as 1) attempted contact with clients within three months of application completion date to find out whether or not client has received insurance card or 2) checking status with appropriate insurer through telephone or computer (e.g. MEDS/AEVS/IVR/IEVS). This objective documents agency effort to ascertain enrollment status. A minimum of three (3) attempted calls must be made and documents unless successful contact has been made.	2.2c	Enter data from DPH approved forms into CHOI data system.	7/1/14- 6/30/15	2.2c DPH data system will be queried to generate number of clients for whom enrollment status has been investigated in monthly reports submitted to DPH.
2.3 By June 30, 2015, Contractor (and subcontractor) will have confirmed enrollment on 75% of client applications assisted with or facilitated by Contractor as measured in Objective 2.1. This objective documents enrollment outcome. "Confirmed enrollment" is defined as: 1) client has stated that they received notification from insurer or 2) appropriate insurer or computer system has	2.3a 2.3b	Document dates of enrollment follow-up and enrollment status on enrollment verification and troubleshooting form. Enter data from DPH approved forms into CHOI database	7/1/14 – 6/30/15 7/1/14- 6/30/15	2.3a Completed client enrollment verification and troubleshooting forms/reports will be kept on file. 2.3b CHOI data system will be queried to generate number of clients who have been confirmed enrolled in monthly reports submitted to DPH.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
3.1 By June 30, 2015, for the F5LA Grant, Contractor (and subcontractor) will provide ongoing assistance to 500 clients experiencing problems with enrollment, utilizing benefits, or retention. F5LA Grant Agency Name City of Long Beach Total (Must equal F5LA total above) 500 By June 30, 2015, for the DHCS Grant, Contractor (and subcontractor) will provide ongoing assistance to 75 Medi-Cal clients experiencing problems with enrollment, utilizing benefits or retention DHCS Grant Agency Name Medi-Cal Numbers City of Long Beach 75 Total (Must equal DHCS total above) "Ongoing assistance" is defined as in-depth troubleshooting or problem solving designed to help clients overcome barriers to health insurance enrollment, utilization, or retention. Assistance may be provided to 1) clients who originally applied with Contractor or 2) clients who submitted applications with another agency or DPSS but have requested assistance from Contractor. A minimum of three (3) attempted calls must be made and documents unless successful contact has been made.	 3.1a Develop, or review and revise, utilization protocol and submit to DPH for approval. 3.1b Conduct troubleshooting/problem solving for clients. Document results on appropriate forms. 3.1c Enter data from DPH approved forms into CHOI database. 	8/1/14- 6/30/15 7/1/14 - 6/30/15 7/1/14 - 6/30/15	 3.1a Letter(s) of DPH approval and materials will be kept on file. 3.1b Completed forms will be kept on file and number of participants will be documented in monthly reports to DPH. 3.1c CHOI database will be queried to generate numbers of clients receiving ongoing assistance in monthly reports submitted to DPH.

Contractor: City of Long Beach Dept. of Health and Human Services .

Contract #: PH-002508-2

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

3.2 By June 30, 2015, Contractor (and subcontractor) will offer utilization assistance at 4-6 months to 70% of clients whose applications were assisted or facilitated	3.2a Develop, or review and revise, utilization protocol and submit to DPH for approval.	7/1/14- 6/30/15	3.2a Letter(s) of DPH approval and materials will be kept on file.
by Contractor in Objective 2.1 and were confirmed enrolled	3.2b. Conduct utilization assistance and document results on utilization forms using the appropriate codes.	7/1/14- 6/30/15	3.2b. Completed forms will be kept on file and number of participants will be documented in monthly reports to DPH.
"Offer utilization assistance" is defined as attempting to contact 100% of clients and making successful contact with 70% of clients either in-person or by telephone to determine whether benefits have been utilized.	3.2c. Enter data from DPH approved utilization forms into DPH CHOI database.	7/1/14- 6/30/15	3.2c. DPH data system will be queried to generate number of clients offered utilization assistance at 4-6 months in monthly reports submitted to DPH.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

MEASURABLE OBJECTIVE(S)		IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
4.1 By June 30, 2015, Contractor (and subcontractor offer redetermination assistance at 11-12 months 65% of clients whose applications were assisted facilitated by Contractor in Objective 2.1 and wer confirmed enrolled. "Offer redetermination assistance" is defined as attempting to contact 100% of clients and making successful contact with 65% of clients either inperson or by telephone to determine whether redetermination assistance is desired. A minimum three (3) attempted calls must be made and documents unless successful contact has been made.	4.1b	Develop, or review and revise, redetermination protocol and submit to DPH for approval. Conduct redetermination assistance and document results on redetermination forms using the appropriate codes. Enter data from DPH approved redetermination forms into CHOI database.	8/1/14- 6/30/15 7/1/14- 6/30/15 7/1/14- 6/30/15	 4.1a Letter(s) of DPH approval and materials will be kept on file. 4.1b. Completed forms will be kept on file and number of participants will be documented in monthly reports to DPH via CHOI database. 4.1c. CHOI data system will be queried to generate number of clients offered redetermination assistance at 11-12 months in monthly reports submitted to DPH.
4.2 By June 30, 2015, Contractor (and subcontracto will provide redetermination assistance to clients submitted their original application elsewhere, by have requested redetermination assistance from Contractor. "Provide redetermination assistance" is defined a helping clients to complete health insurance recertification/renewal paperwork.	4.2a	document on DPH approved Intake Form into CHOI database.	7/1/14- 6/30/15 7/1/14- 6/30/15	4.2a Completed forms will be kept on file. 4.2b CHOI data system will be queried to generate number of "non-agency" clients receiving redetermination assistance in monthly reports submitted to DPH.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
 5.1 By June 30, 2015, Contractor (and subcontractor) will have a minimum of 65% retention rate at 14 months for a sample of clients who submitted applications and were confirmed enrolled (Objective 2.1) "Retention rate" is defined as the number of clients who are still enrolled 14 months after submission of application. "Sample" is defined as a subset of clients who applied over a defined period (month and guidelines to be determined by DPH) who are contacted by Contractor 14 months later to determine enrollment status. 	 5.1a Develop, or review and revise, retention protocol. Submit to DPH for approval 5.1b. Conduct retention activities and document results on retention verification documents. 5.1c Submit data from retention verification documents to DPH. 	8/1/14 – 6/30/15 DPH will determine the date to conduct the 14- month Retention Survey	5.1a Letters of DPH approved materials will be kept on file. 5.1b Completed retention verification document will be kept on file and results submitted to DPH as required. 5.1c DPH will compute contractor retention rate and report summary of results to Contractor.
6.1 By June 30, 2015, Contractor (and subcontractor) will enter data on program participants into CHOI database system to monitor, facilitate, and evaluate health insurance enrollment and retention.	6.1a Contractor will install any necessary computer hardware or software in order to access the Internet.	7/1/14- · 6/30/15	6.1a Contractor will demonstrate the ability to access the Internet.
Please note: For clients assisted through funds from the DHCS Grant, Contractor (and subcontractor) will enter data in the CHOI data base under the Funding Source "DHCS Grant".	6.1b Ensure that appropriate staff are trained on data entry AND participate in all DPH required and uninitiated data meetings, updates, and discussions.	7/1/14- 6/30/15 7/1/14-	6.1b Documentation of training and issuance of username and password for data input. 6.1c CHOI Database
"Enter data" is defined as directly entering required data elements into the DPH web-based data system available to all contractors.	6.1c Enter data into CHOI database 6.1d Run monthly report and send signed copy to DPH.	6/30/15 7/1/14- 6/30/15	6.1d Maintain copies of signed monthly reports on file.
	6.1e Ensure DPH-approved latest forms and documents are utilized and on file.	7/1/14 — 6/30/15	6.1e Maintain latest forms and documents on file.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
7.1 By June 30, 2015, Contractor (and subcontractor) will ensure that 100% of enrollment staff, including staff at subcontracting agencies, are fully trained to provide outreach, enrollment, utilization and retention services.	7.1a Attend all required DPH approved trainings. A list of required trainings will be provided to Contractors by DPH.	7/1/14 – 6/30/15	7.1a Maintain certificates of attendance in employee files. Document names of new staff attending the required trainings in the monthly reports to DPH.
"Fully trained" is defined as participation in DPH required and approved trainings and any pertinent programmatic updates for staff providing services. Additional DPH process trainings (e.g., DPH forms and data system updates) may be required as necessary.	7.1b Contractor and subcontractor enrollment staff shall attend update trainings for new or changed initiatives/programs as required or at a minimum, every 2 years.	7/1/14 — 6/30/15	7.1b Maintain certificates of attendance in employee files. Document names of staff attending updated trainings in the monthly reports to DPH.
8.1 By June 30, 2015, Contractor will participate in a minimum of 80% of the convened monthly contractor meetings.	8.1a Attend Contractors' monthly meetings.	7/1/14- 6/30/15	8.1a Document names of individuals attending monthly Contractor meeting in monthly reports to DPH.
"Participate" is defined as attendance by at least one representative from the contracting agency			
1,000			
		,	

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
9.1 By June 30, 2015, Contractor (and subcontractor) will support, implement, and participate in 100% of the outreach, enrollment, utilization, and retention required evaluation activities including assisting in routine and/or piloted data and tracking projects related to the CHOI data system or other electronic application submission system(s).	 9.1a Contractor and subcontractor staff shall work with DPH for compilation of data, review of outreach efforts, and tracking subcontractors' activities and special projects. 9.1b Contractor and subcontractor staff shall attend DPH training on CHOI data system and other electronic application submission system(s) implemented in Los Angeles county. 9.1c Contractor and subcontractor staff shall utilize CHOI data system and work with DPH to identify implementation barriers. 	7/1/14- 6/30/15 7/1/14- 6/30/15 7/1/14- 6/30/15	 9.1a Maintain all materials/tools, records of workload reports, enrollment figures and data on file. 9.1b Document attendance in monthly reports submitted to DPH 9.1c Document utilization and participation in monthly reports submitted to DPH.
10.1 By June 30, 2015, Contractor (and subcontractor) will conduct 100% of Quality Improvement Plan (QIP) Activities	 10.1a Develop, or review and revise, a QIP describing a process for ensuring continual progress toward measurable objectives, client satisfaction, and success of outreach, enrollment, utilization, and retention services. 10.1b Conduct QIP activities. 	8/1/14- 6/30/15 7/1/14- 6/30/15	10.1a Submit QIP to DPH for approval. Letter of QIP approval will be maintained on file.10.1b Document QIP activities in monthly reports to DPH.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
For Contractors with Subcontractors:			
11.1 By June 30, 2015, Contractor will conduct a minimum of one site visit and one annual contract monitoring to each subcontractor.	11.1a Schedule site visits and maintain list of site, dates, and times.	7/1/14- 6/30/15	11.1a Completed materials will be kept on file. Schedule of site visit shall be submitted with monthly reports to DPH.
	11.1b Conduct site visit utilizing check list provided by DPH and maintain monitoring visit check list.	1/1/15- 6/30/15	11.1b Completed materials will be kept on file including sign-in sheets and completed DPH monitoring visit check list.
	11.1c Conduct annual contract monitoring	1/1/15- 6/30/15	11.1c Completed contract monitoring tools and documentation will be kept on file.
	11.1.d Prepare Reports of Findings and approve subcontractors' corrective action responses.	3/1/15- 6/30/15	11.1d Completed documentation of correction action materials will be kept on file.
			-
		۳.	

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-15

Goal: To increase access to health care by assisting children, families and individuals in Los Angeles county to enroll in health coverage programs and utilize and retain these benefits.

Note: All materials listed under implementation activities and documentation must be kept on file and available for random sampling and auditing by DPH.

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
12.1 By June 30, 2015, Contractor will ensure that 100% of funded staff participates in the Medi-Cal Administrative Activities (MAA) reimbursement program, as allowed by law. Contractor (and subcontractor) staff funded through	12.1 Schedule contractor staff members for DPH MAA training(s). Ensure that contractor staff members attend DPH MAA training(s).	As Scheduled As Scheduled	12.1 Verification of MAA training for contractor staff members will be kept on file. A listing of trained staff and a copy of training materials will be kept on file.
this County agreement will attend MAA training(s) as scheduled and complete MAA time survey(s) as allowed/required by the State or County.	Ensure that contractor staff members' complete MAA time survey(s) as required by the State.	ongoing	A copy of time survey forms will be kept on file.
Objective 12.1 is not applicable	Monitor staff's time completion of MAA time surveys; conduct verification of work activities and recorded time expended; attach time survey to employee time card and time card correction form and reconcile these documents.	ongoing	A copy of time survey forms, time cards, and time card correction forms will be kept on file.
	Approve MAA time surveys. Submit the following to DPH: the survey form, employee time card and time card correction form, Time Survey Packet Review Form, Secondary Documentation Forms and supporting verification documents (e.g., CHOI forms, data system printouts, agendas, event summaries); and DPH approved outreach and health education materials as required by CHOI.	ongoing	Copies of time survey forms, time cards, time card correction forms, Time Survey Packet Review Forms, Secondary Documentation Forms and supporting verification documents (e.g., CHOI forms, data system printouts, agendas, event summaries); and DPH approved outreach and health education materials will be kept on file.
	Attend scheduled DPH meetings to discuss the MAA federal reimbursement program (project manager/coordinator).	ongoing	Meeting agendas and notes will be kept on file.
	Participate in MAA audit, as scheduled by State and federal agencies.	ongoing	Contractor staff members will be available for interviews during audit period.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
* Service Planning Area(s) must be specified		-	
1.1 By June 30, 2016, for the First 5 LA Grant, Contractor (and subcontractor) will have successfully engaged a minimum of <u>5,000</u> number) of the target population in in the City of Long Beach through an outreach/inreach contact.	Develop, or review and revise, outreach protocol including: outreach contact forms/event summary sheets, sign-in sheets, and educational materials. Outreach and educational materials shall be culturally and linguistically appropriate and include information	8/1/15- 6/30/16	1.1a DPH letters of approval and materials will be kept on file.
For Agencies w/ Subcontractors, specify target & SPAs: First 5 LA Grant Agency Name City of Long Beach SPA(s) Numbers 5,000	regarding Medi-Cal, Healthy Families and other no or low-cost health programs. Submit to County of Los Angeles Department of Public Health (DPH) for approval.		
Total (Must equal F5LA total above) 5,000	1.1b Schedule outreach and maintain a list or calendar of sites, dates, and times.	07/1/15- 6/30/16	1.1b Documents will be kept on file and summary of events will be submitted with monthly reports to DPH
By June 30, 2016, for the DHCS Grant, Contractor will have engaged a minimum 1.000 of the Medi-Cal eligible target population in the City of Long Beach.	1.1c Conduct outreach at events (e.g., presentations, fairs, etc.) and complete event summaries.	07/1/15- 6/30/16	1.1c Completed documents will be kept on file and number of participants will be
DHCS Grant	Event summaries to include site, date, name of		reported to DPH in monthly reports.
Agency Name SPA(s) Medi-Cal Numbers	outreach worker(s), flyers, number of individuals contacted, sign-in sheets, if appropriate, and materials presented.		
City of Long Beach Citywide 1000	1.1d Conduct outreach (e.g., telephone outreach,	07/1/15-	1.1d Completed documentation will be kept
Total (Must equal DHCS total above) 1000	walk-ins, etc.) and maintain contact documentation including but not limited to: sites, dates, name of outreach worker(s), number of	6/30/16	on file and number of participants will be reported to DPH in monthly reports.
	individuals contacted, family name/identifier.		
*the requirement and execution of F5LA target numbers for FY 15-16 is pending F5LA funding availability.	1.1e Enter documentation of outreach numbers into CHOI database.	07/1/15- 6/30/16	1.1e Data system will be queried to generate outreach numbers.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

Goal: To increase access to health care by assisting children, families and individuals in Los Angeles county to enroll in health coverage programs and utilize and retain these benefits.

Note: All materials listed under implementation activities and documentation must be kept on file and available for random sampling and auditing by DPH.

<u>"Successfully engaged"</u> is defined as having documented agency outreach contacts (see Implementation Activities 1.1d and Methods of Evaluating Objectives 1.1c)

An "outreach or in-reach contact" is defined as speaking directly either in person or by telephone with a client or potential client(s) for at least eight (8) minutes to publicize available health care options and services. Outreach contacts may include education, promotion, presentations, and informational activities and may be to individuals or groups of people who may be clients, potential clients or personnel with access to potential clients (school staff, WIC sites, CBO staff, etc.). Contractor must ensure to not limit outreach activities within own agency/clinic but rather provide appropriate comprehensive outreach efforts outside of own agency to ensure that proposed geographic areas/SPA(s) are targeted accordingly and maximize all outreach opportunities to low income families and their children.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION	
* Service Planning Area(s) must be specified				
2.1 June 30, 2016, for the F5LA Grant, Contractor (and subcontractor) will have completed applications for a minimum of 1,000 clients within Service Planning Area(s) X & X (insert SPAs) for Healthy Kids, Medical, Healthy Families and other no/low cost plans. Contractor will also provide clients with referrals to appropriate health programs or health agencies	2.1a Develop, or review and revise, enrollment protocol. Submit to DPH for approval.	8/1/15- 6/30/16	2.1a DPH letters of approval and materials will be on file.	
F5LA Grant Agency Name City of Long Beach Citywide Total (Must equal F5LA total above) By June 30, 2016, for the DHCS Grant, Contractor (and subcontractor) will have completed Medi-Cal applications for a minimum of 200 eligible clients within SPAs X and X.	2.1b Conduct enrollment activities utilizing DPH approved client intake form.	07/1/15- 6/30/16	2.1b Completed materials (i.e. client intake and enrollment documents) will be kept on file and number of participants documented in monthly reports to DPH. Printed documents of electronically submitted applications will be made available upon DPH request.	
For Agencies with Subcontractors, specify target and Service Planning Area(s). DHCS Grant	2.1c Enter data from DPH approved forms into CHOI data system utilizing appropriate codes.	07/1/15- 6/30/16	For monthly reports, DPH data system will be queried to generate number of applications submitted.	
Agency Name SPA(s) Medi-Cal Numbers City of Long Beach Citywide 200	2.1d Develop, or review and revise, referral protocol and submit to DPH for approval.	8/1/15÷ 6/30/16	2.1d DPH letters of approval on file.	
*Total (Must equal DHCS total above) 200 *the requirement and execution of F5LA target numbers for FY 15-16 is pending F5LA funding availability.	Screen and refer clients for appropriate services. Document referral information with appropriate codes on client intake form or appropriate DPH approved forms.	07/1/15- 6/30/16	2.1e Maintain client intake forms with services/program referral information.	

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

Completed applications" is defined as assisting clients to fill out health insurance applications line-by-line, through in-person, telephone assistance or electronic submission. It may also be defined as providing in-depth assistance (troubleshooting) oward facilitating enrollments for clients whose applications were unsuccessfully completed by another agency or DPSS.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
2.2 By June 30, 2016, Contractor (and subcontractor) will have investigated enrollment status within three months of application completion date on a minimum of 100% of clients for whom agency assisted with or facilitated applications as measured in Objective 2.1. "Investigated enrollment status" is defined as 1) attempted contact with clients within three months of application completion date to find out whether or not client has received insurance card or 2) checking status with appropriate insurer through telephone or computer (e.g. MEDS/AEVS/IVR/IEVS). This objective documents agency effort to ascertain enrollment status. A minimum of three (3) attempted calls must be made and documents unless successful contact has been made.	Develop, or review and revise, enrollment verification protocol. Submit to DPH for approval. Conduct enrollment verification and troubleshooting using DPH approved enrollment verification and troubleshooting forms. Enter data from DPH approved forms into CHOI data system.	8/1/15— 6/30/16 07/1/15— 6/30/16 07/1/15- 6/30/16	2.2a Letter(s) of DPH approval and materials will be kept on file. 2.2b Completed client enrollment verification and troubleshooting forms/reports will be kept on file. 2.2c DPH data system will be queried to generate number of clients for whom enrollment status has been investigated in monthly reports submitted to DPH.
2.3 By June 30, 2016, Contractor (and subcontractor) will have confirmed enrollment on 75% of client applications assisted with or facilitated by Contractor as measured in Objective 2.1. This objective documents enrollment outcome. "Confirmed enrollment" is defined as: 1) client has stated that they received notification from insurer or 2) appropriate insurer or computer system has verified that client has been successfully enrolled.	Document dates of enrollment follow-up and enrollment status on enrollment verification and troubleshooting form. Enter data from DPH approved forms into CHOI database	07/1/15 — 6/30/16 07/1/15- 6/30/16	2.3a Completed client enrollment verification and troubleshooting forms/reports will be kept on file. 2.3b CHOI data system will be queried to generate number of clients who have been confirmed enrolled in monthly reports submitted to DPH.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
3.1 By June 30, 2016, for the F5LA Grant, Contractor (and subcontractor) will provide ongoing assistance to 500 clients experiencing problems with enrollment, utilizing benefits, or retention. F5LA Grant Agency Name City of Long Beach Total (Must equal F5LA total above) 500 By June 30, 2016, for the DHCS Grant, Contractor (and subcontractor) will provide ongoing assistance to XXXX Medi-Cal clients experiencing problems with enrollment, utilizing benefits or retention DHCS Grant Agency Name Medi-Cal Numbers City of Long Beach T5 Total (Must equal DHCS total above) *the requirement and execution of F5LA target numbers for FY 15-16 is pending F5LA funding availability.	 3.1a Develop, or review and revise, utilization protocol and submit to DPH for approval. 3.1b Conduct troubleshooting/problem solving for clients. Document results on appropriate forms. 3.1c Enter data from DPH approved forms into CHOI database. 	8/1/15- 6/30/16 07/1/15 - 6/30/16 07/1/15 - 6/30/16	 3.1a Letter(s) of DPH approval and materials will be kept on file. 3.1b Completed forms will be kept on file and number of participants will be documented in monthly reports to DPH. 3.1c CHOI database will be queried to generate numbers of clients receiving ongoing assistance in monthly reports submitted to DPH.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

	"Ongoing assistance" is defined as in-depth troubleshooting or problem solving designed to help clients overcome barriers to health insurance enrollment, utilization, or retention. Assistance may be provided to 1) clients who originally applied with Contractor or 2) clients who submitted applications with another agency or DPSS but have requested assistance from Contractor. A minimum of three (3) attempted calls must be made and documents unless successful contact has been made.			
3.2	By June 30, 2016, Contractor (and subcontractor) will offer utilization assistance at 4-6 months to 70% of clients whose applications were assisted or facilitated by Contractor in Objective 2.1 and were confirmed enrolled "Offer utilization assistance" is defined as attempting to contact 100% of clients and making successful contact with 70% of clients either in-person or by telephone to determine whether benefits have been utilized.	 3.2a Develop, or review and revise, utilization protocol and submit to DPH for approval. 3.2b. Conduct utilization assistance and document results on utilization forms using the appropriate codes. 3.2c. Enter data from DPH approved utilization forms into DPH CHOI database. 	07/1/15- 6/30/16 07/1/15- 6/30/16 07/1/15- 6/30/16	 3.2a Letter(s) of DPH approval and materials will be kept on file. 3.2b. Completed forms will be kept on file and number of participants will be documented in monthly reports to DPH. 3.2c. DPH data system will be queried to generate number of clients offered utilization assistance at 4-6 months in monthly reports submitted to DPH.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

	MEASURABLE OBJECTIVE(S)		IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
4.1	By June 30, 2016, Contractor (and subcontractor) will offer redetermination assistance at 11-12 months to 65% of clients whose applications were assisted or facilitated by Contractor in Objective 2.1 and were confirmed enrolled. "Offer redetermination assistance" is defined as attempting to contact 100% of clients and making successful contact with 65% of clients either inperson or by telephone to determine whether redetermination assistance is desired. A minimum of three (3) attempted calls must be made and documents unless successful contact has been made.	4.1b.	Develop, or review and revise, redetermination protocol and submit to DPH for approval. Conduct redetermination assistance and document results on redetermination forms using the appropriate codes. Enter data from DPH approved redetermination forms into CHOI database.	8/1/15- 6/30/16 07/1/15- 6/30/16 07/1/15- 6/30/16	4.1a Letter(s) of DPH approval and materials will be kept on file. 4.1b. Completed forms will be kept on file and number of participants will be documented in monthly reports to DPH via CHOI database. 4.1c. CHOI data system will be queried to generate number of clients offered redetermination assistance at 11-12 months in monthly reports submitted to DPH.
4.2	By June 30, 2016, Contractor (and subcontractor) will provide redetermination assistance to clients who submitted their original application elsewhere, but have requested redetermination assistance from Contractor. "Provide redetermination assistance" is defined as helping clients to complete health insurance recertification/renewal paperwork.	4.2a	Conduct redetermination assistance and document on DPH approved Intake Form into CHOI database. Enter data from CHOI approved Intake Form into CHOI database data system.	07/1/15- 6/30/16 07/1/15- 6/30/16	4.2a Completed forms will be kept on file. 4.2b CHOI data system will be queried to generate number of "non-agency" clients receiving redetermination assistance in monthly reports submitted to DPH.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
5.1 By June 30, 2016, Contractor (and subcontractor) will have a minimum of 65% retention rate at 14 months for a sample of clients who submitted applications and were confirmed enrolled (Objective 2.1) "Retention rate" is defined as the number of clients who are still enrolled 14 months after submission of application. "Sample" is defined as a subset of clients who applied over a defined period (month and guidelines to be determined by DPH) who are contacted by Contractor 14 months later to determine enrollment status.	 5.1a Develop, or review and revise, retention protocol. Submit to DPH for approval 5.1b. Conduct retention activities and document results on retention verification documents. 5.1c Submit data from retention verification documents to DPH. 	8/1/15 – 6/30/16 DPH will determine the date to conduct the 14- month Retention Survey	 5.1a Letters of DPH approved materials will be kept on file. 5.1b Completed retention verification document will be kept on file and results submitted to DPH as required. 5.1c DPH will compute contractor retention rate and report summary of results to Contractor.
6.1 By June 30, 2016, Contractor (and subcontractor) will enter data on program participants into CHOI database system to monitor, facilitate, and evaluate health insurance enrollment and retention.	6.1a Contractor will install any necessary computer hardware or software in order to access the Internet.	07/1/15- 6/30/16	6.1a Contractor will demonstrate the ability to access the Internet.
Please note: For clients assisted through funds from the DHCS Grant, Contractor (and subcontractor) will enter data in the CHOI data base under the Funding Source "DHCS Grant".	6.1b Ensure that appropriate staff are trained on data entry AND participate in all DPH required and uninitiated data meetings, updates, and discussions.	07/1/15- 6/30/16	6.1b Documentation of training and issuance of username and password for data input. 6.1c CHOI Database
"Enter data" is defined as directly entering required data elements into the DPH web-based data system available to all contractors.	6.1c Enter data into CHOI database 6.1d Run monthly report and send signed copy to DPH. 6.1e Ensure DPH-approved latest forms and	07/1/15- 6/30/16 07/1/15- 6/30/16	6.1c CHOI Database 6.1d Maintain copies of signed monthly reports on file. 6.1e Maintain latest forms and documents on
*· * ;	documents are utilized and on file.	6/30/16	file.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
7.1 By June 30, 2016, Contractor (and subcontractor) will ensure that 100% of enrollment staff, including staff at subcontracting agencies, are fully trained to provide outreach, enrollment, utilization and retention services.	7.1a Attend all required DPH approved trainings. A list of required trainings will be provided to Contractors by DPH.	07/1/15 — 6/30/16	7.1a Maintain certificates of attendance in employee files. Document names of new staff attending the required trainings in the monthly reports to DPH.
"Fully trained" is defined as participation in DPH required and approved trainings and any pertinent programmatic updates for staff providing services. Additional DPH process trainings (e.g., DPH forms and data system updates) may be required as necessary.	7.1b Contractor and subcontractor enrollment staff shall attend update trainings for new or changed initiatives/programs as required or at a minimum, every 2 years.	07/1/15 — 6/30/16	7.1b Maintain certificates of attendance in employee files. Document names of staff attending updated trainings in the monthly reports to DPH.
8.1 By June 30, 2016, Contractor will participate in a minimum of 80% of the convened monthly contractor meetings. "Participate" is defined as attendance by at least one representative from the contracting agency.	8.1a Attend Contractors' monthly meetings.	07/1/15- 6/30/16	8.1a Document names of individuals attending monthly Contractor meeting in monthly reports to DPH.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
9.1 By June 30, 2016, Contractor (and subcontractor) will support, implement, and participate in 100% of the outreach, enrollment, utilization, and retention required evaluation activities including assisting in routine and/or piloted data and tracking projects related to the CHOI data system or other electronic application submission system(s).	 9.1a Contractor and subcontractor staff shall work with DPH for compilation of data, review of outreach efforts, and tracking subcontractors' activities and special projects. 9.1b Contractor and subcontractor staff shall attend DPH training on CHOI data system and other electronic application submission system(s) implemented in Los Angeles county. 9.1c Contractor and subcontractor staff shall utilize CHOI data system and work with DPH to identify implementation barriers. 	07/1/15- 6/30/16 07/1/15- 6/30/16 07/1/15- 6/30/16	 9.1a Maintain all materials/tools, records of workload reports, enrollment figures and data on file. 9.1b Document attendance in monthly reports submitted to DPH 9.1c Document utilization and participation in monthly reports submitted to DPH.
10.1 By June 30, 2016, Contractor (and subcontractor) will conduct 100% of Quality Improvement Plan (QIP) Activities	10.1a Develop, or review and revise, a QIP describing a process for ensuring continual progress toward measurable objectives, client satisfaction, and success of outreach, enrollment, utilization, and retention services. 10.1b Conduct QIP activities.	8/1/15- 6/30/16 07/1/15- 6/30/16	 10.1a Submit QIP to DPH for approval. Letter of QIP approval will be maintained on file. 10.1b Document QIP activities in monthly reports to DPH.

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
For Contractors with Subcontractors:			
11.1 By June 30, 2016, Contractor will conduct a minimum of one site visit and one annual contract monitoring to each subcontractor.	11.1a Schedule site visits and maintain list of site, dates, and times.	07/1/15- 6/30/16	11.1a Completed materials will be kept on file. Schedule of site visit shall be submitted with monthly reports to DPH.
	11.1b Conduct site visit utilizing check list provided by DPH and maintain monitoring visit check list.	1/1/15- 6/30/16	11.1b Completed materials will be kept on file including sign-in sheets and completed DPH monitoring visit check list.
	11.1c Conduct annual contract monitoring	1/1/15- 6/30/16	11.1c Completed contract monitoring tools and documentation will be kept on file.
	11.1.d Prepare Reports of Findings and approve subcontractors' corrective action responses.	3/1/15- 6/30/16	11.1d Completed documentation of correction action materials will be kept on file.
		-	

Scope of Work

Children's Health Outreach, Enrollment, Utilization and Retention Services FIRST 5 LA GRANT AND DHCS MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2015-16

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
12.1 By June 30, 2016, Contractor will ensure that 100% of funded staff participates in the Medi-Cal Administrative Activities (MAA)	12.1 Schedule contractor staff members for DPH MAA training(s).	As Scheduled	12.1 Verification of MAA training for contractor staff members will be kept on file.
reimbursement program, as allowed by law. Contractor (and subcontractor) staff funded through this County agreement will attend MAA training(s) as scheduled and complete MAA time survey(s) as allowed/required by the State or County.	Ensure that contractor staff members attend DPH MAA training(s).	As Scheduled	A listing of trained staff and a copy of training materials will be kept on file.
	Ensure that contractor staff members' complete MAA time survey(s) as required by the State.	ongoing	A copy of time survey forms will be kept on file.
Objective 12.1 is not applicable	Monitor staff's time completion of MAA time surveys; conduct verification of work activities and recorded time expended; attach time survey to employee time card and time card correction form and reconcile these documents.	ongoing	A copy of time survey forms, time cards, and time card correction forms will be kept on file.
	Approve MAA time surveys. Submit the following to DPH: the survey form, employee time card and time card correction form, Time Survey Packet Review Form, Secondary Documentation Forms and supporting verification documents (e.g., CHOI forms, data system printouts, agendas, event summaries); and DPH approved outreach and health education materials as required by CHOI.	ongoing	Copies of time survey forms, time cards, time card correction forms, Time Survey Packet Review Forms, Secondary Documentation Forms and supporting verification documents (e.g., CHOI forms, data system printouts, agendas, event summaries); and DPH approved outreach and health education materials will be kept on file.
	Attend scheduled DPH meetings to discuss the MAA federal reimbursement program (project manager/coordinator).	ongoing	Meeting agendas and notes will be kept on file.
	Participate in MAA audit, as scheduled by State and federal agencies.	ongoing	Contractor staff members will be available for interviews during audit period.

SCHEDULE

CITY OF LONG BEACH DEPARTMENT OF HEALTH & HUMAN SERVICES CHILDREN'S HEALTH OUTREACH, ENROLLMENT, UTILIZATION AND RETENTION SERVICES

FIRST5LA GRANT

	•	Budget Period July 1, 2014 hrough June 30, 2015
Full-Time Salaries	9	110,942
Employee Benefits @ 39%	. 9	<u> 43,711</u>
Total Full-Time Salaries and Employee Benefits	\$	5 154,654
Part-Time Salaries	\$	6 0
Employee Benefits @ 0%	9	<u> </u>
Total Part-Time Salaries and Employee Benefits	•	6 0
Total Salaries and Employee Benefits	\$	5 154,654
Operating Expenses	\$	3,710
Equipment	S	7,056
Rent	•	0
Subcontracts	\$	0
Indirect Cost @ 10% of Salaries	5	<u>11,094</u>
TOTAL PROGRAM BUDGET		176,514

Per Paragraph 4, Section C and Paragraph 6, Section A of the Children's Health Outreach, Enrollment, Utilization and Retention Services Contract, during the term of this Contract, any variation to the above budget must have prior written approval of the Department of Public Health Director or his designee. Funds shall only be utilized for eligible program expenses.

SCHEDULE

CITY OF LONG BEACH DEPARTMENT OF HEALTH & HUMAN SERVICES CHILDREN'S HEALTH OUTREACH, ENROLLMENT, UTILIZATION AND RETENTION SERVICES

California Department of Health Care Services (DHCS) Medi-Cal Outreach and Enrollment Grant

	Ju thr	idget Period ly 1, 2014 rough ne 30, 2015
Full-Time Salaries	\$	30,010
Employee Benefits @ 25.05%	<u>\$</u>	7,518
Total Full-Time Salaries and Employee Benefits	\$	37,528
Part-Time Salaries	\$	0
Employee Benefits @ 0%	\$	0
Total Part-Time Salaries and Employee Benefits	\$	0
Total Salaries and Employee Benefits	\$	37,528
Operating Expenses	\$	0
Equipment	\$	0
Rent	\$	0
Subcontracts	\$	0
Indirect Cost @ <u>0%</u> of Salaries	\$_	0
TOTAL PROGRAM BUDGET	\$	37,528

Per Paragraph 4, Section C and Paragraph 6, Section A of the Children's Health Outreach, Enrollment, Utilization and Retention Services Contract, during the term of this Contract, any variation to the above budget must have prior written approval of the Department of Public Health Director or his designee. Funds shall only be utilized for eligible program expenses.

SCHEDULE

CITY OF LONG BEACH DEPARTMENT OF HEALTH & HUMAN SERVICES CHILDREN'S HEALTH OUTREACH, ENROLLMENT, UTILIZATION AND RETENTION SERVICES

California Department of Health Care Services (DHCS) Medi-Cal Outreach and Enrollment Grant

	Ju th	udget Period Ily 1, 2015 rough ne 30, 2016
Full-Time Salaries	\$	30,010
Employee Benefits @ 25.05%	<u>\$</u>	7,518
Total Full-Time Salaries and Employee Benefits	\$	37,528
Part-Time Salaries	\$	0
Employee Benefits @ 0%	\$_	0
Total Part-Time Salaries and Employee Benefits	\$	0
Total Salaries and Employee Benefits	\$	37,528
Operating Expenses	\$	0
Equipment	\$	0
Rent	\$	0
Subcontracts	\$	0
Indirect Cost @ 0% of Salaries	\$_	0
TOTAL PROGRAM BUDGET	\$	37,528

Per Paragraph 4, Section C and Paragraph 6, Section A of the Children's Health Outreach, Enrollment, Utilization and Retention Services Contract, during the term of this Contract, any variation to the above budget must have prior written approval of the Department of Public Health Director or his designee. Funds shall only be utilized for eligible program expenses.



CYNTHIA A. HARDING, M.P.H. Chief Deputy Director

Children's Health Outreach Initiatives

Ayda Ghebrezghi, MSW, MPA
Acting Director
600 South Commonwealth Avenue, Suite 805
Los Angeles, California 90005
TEL (213) 637-8481 • FAX (213) 427-6157
www.publichealth.lacountv.gov.

July 17, 2014

Patrick H. West, City Manager Long Beach Health and Human Services Dept. 333 West Ocean Blvd., 13th Floor Long Beach, CA 90802

Dear Mr. West:

RE: Contract Amendment Documents for Children's Health Outreach, Enrollment, Utilization and Retention Services (CHOEUR) Contract

Enclosed is Long Beach Health and Human Services Dept.'s contract amendment package for Children's Health Outreach, Enrollment, Utilization and Retention Services (CHOEUR) contract # PH 002508-2. This contract has been amended to include additional funding and outreach and enrollment target numbers for the Department of Health Care Services (DHCS) Medi-Cal Outreach and Enrollment Grant. These target numbers have been approved by your agency Program contact. The attached amended documents include (in order):

- Contract Amendment No. 2
- Exhibit A.1 Statement of Work
- Exhibit B-2.1 Scope of Work for Fiscal Year 2014-15
- Exhibit B-3 Scope of Work for Fiscal Year 2015-16
- Exhibit C- 2.1 Budget Schedule for First 5 LA Grant for Fiscal Year 2014-15
- Exhibit C-3 Budget Schedule for DHCS Grant for Fiscal Year 2014-15
- Exhibit C-4 Budget Schedule DHCS Grant for Fiscal Year 2015-16.

Instructions for Contract Amendment Execution:

Please print out three (3) copies of the Contract Amendment signature page <u>only</u>. This is page 7 of the Contract Amendment document. As CEO/Executive Director or other authorized signatory, please fill in the information and sign below Dr. Fielding's signature line.

Please return all 3 original signature pages by Friday, July 25th, 2014 to:

Ayda Ghebrezghi, Acting Director Children's Health Outreach Initiatives Los Angeles County Dept. of Public Health 600 S Commonwealth Ave., Ste. 805 Los Angeles, CA 90005



BOARD OF SUPERVISORS

Gloria Molima
First District
Mark Ridley-Thomas
Second District
Zev Yaroslavsky
Third District
Don Knabe
Fourth District
Michael D. Antonovich

Patrick H. West July 17, 2014. Page 2 of 2

Once your original signature pages are received, the contract amendment will be signed by the Department of Public Health and executed. An original hard copy of the Contract Amendment package will be mailed back to you and will include original signatures from both your agency and DPH.

If you have any questions or require further information, please do not hesitate to contact your Contract Manager Veronica Carter at 213-637-8478, vcarter@ph.lacounty.gov.

Very truly yours,

Ayda Ghebrezghi, Acting Director Children's Health Outreach Initiatives

AG:cv

Enclosures

c: Suzanne Bostwick, Interim Director, Maternal, Child and Adolescent Health Programs Veronica Carter, Staff Analyst