

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

Amendment Number 17

**33184**  
THIS AMENDMENT is made and entered into on August 2, 2021.

by and between

COUNTY OF LOS ANGELES  
(hereafter "County"),

and

CITY OF LONG BEACH DEPARTMENT  
OF HEALTH AND HUMAN SERVICES  
(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 March 4, 2020, the County Board of Supervisors (Board) proclaimed a state of emergency regarding the Novel Coronavirus (COVID-19); and

WHEREAS, on March 30, 2021, the Board delegated authority to the Director of Public Health, or designee, to, among other delegations, amend various contracts expiring by September 30, 2021, including this Contract, to extend the term on a month-to-month basis until the end of the month of the six (6) month anniversary following the date on which the Proclamation of a Local and Public Health Emergency due to COVID-19 (Health Emergency Proclamation) is lifted by the Board; and

WHEREAS, under this authority, it is the intent of the parties hereto to amend Contract to extend the term of the Contract for up to nine (9) months beyond the current

Contract expiration date of June 30, 2021 or until six (6) months following the date on which the Coronavirus Disease 2019 Emergency Proclamation is lifted by the Board, whichever occurs earlier; effective July 1, 2021, through March 31, 2022, increase the maximum obligation of County, and make other hereafter designated changes, to allow for the continuation of Children's Health Outreach, Enrollment, Utilization and Retention Services; and

WHEREAS, County has been allocated funding from California Assembly Bill 74 (AB74) through the California Department of Health Care Services (CDHCS) Medi-Cal Eligibility Division to support the Medi-Cal Health Enrollment Navigators Project (Navigators Project); 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; and

WHEREAS, Contractor warrants that it possesses the competence, expertise, and personnel necessary to provide services consistent with the requirements of this Contract; and

NOW, THEREFORE, the parties hereto agree as follows:

1. This Amendment is hereby incorporated into the original Contract, and all of its terms and conditions, including capitalized terms defined therein, shall be given full force and effect as if fully set forth herein.
2. This Amendment shall be effective upon execution for the period of July 1, 2021 through March 31, 2022.
3. Wherever the term "DPH" is referenced in this Contract, it shall be deemed amended to state "Public Health."

4. Subparagraph A of Paragraph 2, DESCRIPTION OF SERVICES, shall be deleted in its entirety and replaced as follows:

“A. Contractor shall provide services in the manner described in Exhibits A.3, A.4, A.5.1, A.6, A.7, A.8, A.9, A.10, and A.11 (Statements of Work), and Exhibits B-1, B-2.1, B-3.2, B-4, B-5, B-6.1, B-8, B-9, B-10, B-11, B-12, B-13 and B-14 (Scopes of Work), attached hereto and incorporated herein by reference.”

5. First subparagraph of Paragraph 3, TERM OF CONTRACT, shall be deleted in its entirety and replaced as follows:

“The term of this Contract shall be effective July 1, 2013, and shall continue in full force and effect through March 31, 2022, or until six (6) months following the date when the Coronavirus Disease 2019 Emergency Proclamation is lifted by the Board of Supervisors, whichever occurs earlier, unless sooner terminated or extended, in whole or in part, as provided in this Contract.”

6. Paragraph 4, MAXIMUM OBLIGATION OF COUNTY, subparagraph M shall be added as follows:

“M. For the period of July 1, 2021 through March 31, 2022, the maximum obligation of County for all services provided hereunder shall not exceed one hundred fifty thousand, four hundred ninety-nine dollars (\$150,499) comprised of AB74 funds, as set forth in Exhibit C-17, attached hereto and incorporated herein by reference.”

7. Paragraph 9, CONSIDERATION OF HIRING COUNTY EMPLOYEES TARGETED FOR LAYOFF/OR RE-EMPLOYMENT LIST, shall be deleted in its entirety and replaced to read as follows:

“9. CONSIDERATION OF HIRING COUNTY EMPLOYEES

TARGETED FOR LAYOFFS OR ARE ON A COUNTY RE-EMPLOYMENT LIST:

Should Contractor require additional or replacement personnel after the effective date of this Contract to perform the services set forth herein, Contractor shall give first consideration for such employment openings to qualified, permanent County employees who are targeted for layoff or qualified, former County employees who are on a re-employment list during the life of this Contract.”

8. Subparagraph A of Paragraph 12, GENERAL PROVISION FOR ALL INSURANCE COVERAGES, shall be revised to reflect a revision to the address of submission of insurance certificates as follows:

“Certificates and copies of any required endorsements shall be sent to:

County of Los Angeles – Department of Public Health  
Contract Monitoring Section  
5555 Ferguson Drive, 3<sup>rd</sup> Floor, Suite 3031  
Commerce, California 90022  
Attention: Manager Contract Monitoring Section”

9. Subparagraph C of Paragraph 13, INSURANCE COVERAGE REQUIREMENTS, shall be deleted in its entirety and replaced to read as follows:

“C. Workers Compensation and Employers’ Liability: Contractor shall maintain insurance, or qualified self-insurance, satisfying statutory requirements; including Employers’ Liability coverage with limits of not less than \$1 Million per accident. If Contractor will provide leased employees, or, is: (1) an employee leasing temporary staffing firm; or, (2) a professional employer organization (PEO), coverage also shall include an Alternate Employer Endorsement (providing scope of coverage equivalent to ISO policy form WC 00 03 01 A) naming the County as

the Alternate Employer. Written notice shall be provided to the County at least ten (10) days in advance of cancellation for non-payment of premium and thirty (30) days in advance for any other cancellation or policy change. If applicable to Contractor's operations, coverage shall be arranged to satisfy the requirements of any federal workers or workmen's compensation law or any federal occupational disease law."

10. Paragraph 20, FACSIMILE REPRESENTATIONS, shall be deleted in its entirety and replaced to read as follows:

"20. COUNTERPARTS AND ELECTRONIC SIGNATURES AND REPRESENTATIONS: This Contract may be executed in two or more counterparts, each of which shall be deemed an original but all of which together shall constitute one and the same Contract. The facsimile, email or electronic signature of the Parties shall be deemed to constitute original signatures, and facsimile or electronic copies hereof shall be deemed to constitute duplicate originals. The County and the Contractor hereby agree to regard electronic representations of original signatures of authorized officers of each party, when appearing in appropriate places on the Amendments prepared pursuant to ALTERATIONS AND TERMS/AMENDMENTS Paragraph and received via communications facilities, (facsimile, email or electronic signature), as legally sufficient evidence that such legally binding signatures have been affixed to Amendments to this Contract."

11. Subparagraph A of Paragraph 21, NOTICES, shall be deleted in its entirety and replaced to read as follows:

"A. Notices to County shall be addressed as follows:

- (1) Department of Public Health  
Division of Maternal, Child and Adolescent Health  
Children's Health Outreach Initiatives (CHOI)  
600 South Commonwealth Avenue, Room 805  
Los Angeles, California 90005

Attention: Project Director

- (2) Department of Public Health  
Contracts and Grants Division  
5555 Ferguson Drive, 2<sup>nd</sup> Floor, Suite 210  
City of Commerce, California 90022

Attention: Division Chief"

12. Paragraph 66, PROHIBITION FROM PARTICIPATION IN FUTURE SOLICITATION(S), of the ADDITIONAL PROVISIONS, as identified in Amendment 15 dated April 30, 2020, shall be deleted in its entirety.

13. Paragraph 66, CHILD/ELDER ABUSE/FRAUD REPORT, of the ADDITIONAL PROVISIONS, as identified in Amendment 16 dated October 21, 2020, shall be deleted in its entirety and replaced to read as follows:

"66. CHILD/ELDER ABUSE/FRAUD REPORT

A. Contractor's mandated reporting staff working on this Contract that are subject to California Penal Code (PC) Section 11164 et seq. shall comply with the reporting requirements described in PC Section 11164 et seq. and shall report all known or suspected instances of child abuse to an appropriate child protective agency, as mandated by the aforementioned Code sections. Contractor's mandated reporting staff working on this Contract shall make the report on such abuse, and shall submit all required information, in accordance with PC Sections 11166

and 11167.

B. Child abuse reports shall be made by telephone to the Department of Children and Family Services hotline at (800) 540-4000 within 24 hours of suspicion of instances of child abuse.

C. Contractor's mandated reporting staff working on this Contract that are subject to California Welfare and Institutions Code (WIC), Section 15600 et seq. shall comply with the reporting requirements described in WIC Section 15600 et seq. and shall report all known or suspected instances of physical abuse of elders and dependent adults either to an appropriate County adult protective services agency or to a local law enforcement agency, as mandated by these code sections. Contractor's mandated reporting staff working on this Contract shall make the report on such abuse, and shall submit all required information, in accordance with WIC Sections 15630, 15633 and 15633.5.

D. Elder abuse reports shall be made by telephone to the Department of Workforce Development, Aging, and Community Services hotline at (800) 992-1660 within one (1) business day from the date Contractor became aware of the suspected instance of elder abuse.

E. Contractor staff working on this Contract shall also immediately report all suspected fraud situations to County within three business days to DPSS Central Fraud Reporting Line at (800) 349-9970 unless otherwise restricted by law from disclosing such information."

14. Exhibit A.11, Statement of Work, Medi-Cal Health Enrollment Navigators Project (AB74), attached hereto and incorporated herein by reference shall be added to the Contract.

15. Exhibit B-14, Scope of Work, Medi-Cal Health Enrollment Navigators Project (AB74), attached hereto and incorporated herein by reference shall be added to the Contract.

16. Exhibit C-17, Schedule, Medi-Cal Health Enrollment Navigators Project (AB74), attached hereto and incorporated herein by reference shall be added to the Contract.

17. Except for the changes set forth hereinabove, Contract shall not be changed in any other respect by this Amendment.

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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, or designee, 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 Barbara Ferrer  
Barbara Ferrer, Ph.D., M.P.H., M.Ed.  
Director

CITY OF LONG BEACH DEPARTMENT OF  
HEALTH AND HUMAN SERVICES  
Contractor

By Linda F. Tatum  
Signature  
LINDA F. TATUM  
Printed Name

Title ASST. CITY MANAGER

APPROVED AS TO FORM  
BY THE OFFICE OF THE COUNTY COUNSEL  
RODRIGO A. CASTRO-SILVA  
County Counsel

EXECUTED PURSUANT TO SECTION 301 OF THE CITY CHARTER  
APPROVED AS TO FORM  
July 8, 2021  
CHARLES PARKIN City Attorney

By Taylor M. Anderson  
TAYLOR M. ANDERSON  
DEPUTY CITY ATTORNEY

APPROVED AS TO CONTRACT  
ADMINISTRATION:

Department of Public Health

By Maria Agosto  
Maria Agosto (Aug 2, 2021 08:34 PDT)  
Contracts and Grants Division Management

#05830

**CITY OF LONG BEACH DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**STATEMENT OF WORK**

**Children's Health Outreach, Enrollment, Utilization and Retention (CHOEUR) Services**

**MEDI-CAL HEALTH ENROLLMENT NAVIGATORS PROJECT (AB74)**

**Term July 1, 2021 – March 31, 2022**

**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 Exhibit B-14, Scope 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 within Los Angeles County.

**3. SERVICE DELIVERY SITE(S)**

Contractor's facility where services are to be provided hereunder is 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 (Public Health). Contractor shall request approval from Public Health in writing a minimum of thirty (30) days before terminating services at such location and/or before commencing services at any other location.

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 Exhibit B-14, Scope of Work, attached hereto and incorporated herein by reference.
- B. Contractor shall obtain written approval from Public Health'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 Public Health 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, TERMINATION FOR DEFAULT, 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 Exhibit C-17, Budget.

5. STAFFING REQUIREMENTS

- A. Contractor shall recruit linguistically and culturally appropriate staff. For the purposes of this Contract, staff shall be defined as any individuals providing services as described in Exhibit B-14, Scope 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 Public Health's authorized designee, in writing, prior to filling said vacancy.

6. STAFF DEVELOPMENT AND TRAINING

Contractor shall conduct ongoing and appropriate staff development and training as described in Exhibit B-14, Scope of Work, attached hereto and incorporated herein by reference.

- A. Contractor shall provide and/or allow access to ongoing staff development and training (for) of CHOEUR staff. Staff Development and training shall include, but

not be limited to: Public Health approved CORE Comprehensive Training for new staff and refresher training every two years thereafter; this shall include training on Medi-Cal Programs, and periodic health coverage program reviews and updates.

- B. Contractor shall participate in annual hands-on Children's Health Outreach Initiatives (CHOI) online/webinar database system and forms training.
- C. 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) certification; and, 4) names of attendees, with their respective job titles.
- D. Contractor shall document training activities in the monthly report to Public Health.

## 7. PUBLIC HEALTH CHOI DATA SYSTEM

Contractor shall enter data on program participants into the Public Health Internet-based data tracking and reporting system. "Enter" is defined as: directly entering required data elements into the Public Health data system. Contractor/Subcontractor staff using the Public Health 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 Public Health immediately so that Public Health 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. INVOICES

Contractor shall bill County monthly, in arrears. All billings shall include a financial invoice and all required reports and/or data. Monthly invoices are due by the 15<sup>th</sup> calendar day of the following month.

## 10. REPORTS

Subject to the reporting requirements of Paragraph 40, REPORTS, 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 Public Health data system and submit this monthly report to Public Health 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 Public Health or specified report as requested by Public Health.
- B. **Quarterly Reports:** Contractor shall submit to Public Health 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 Public Health 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.**

11. **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.

12. **QUALITY IMPROVEMENT PLAN**

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

13. **MEDI-CAL ADMINISTRATIVE ACTIVITIES**

Contractor shall perform Medi-Cal Administrative Activities (MAA) 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 Public Health approved outreach and health education materials), as required by Public Health.

**Scope of Work**  
**Children's Health Coverage: Outreach, Enrollment, Utilization and Retention Services**  
**Medi-Cal Health Enrollment Navigators Project (AB74)**  
**Term: July 1, 2021 – March 31, 2022**

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 Public Health.**

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION						
<p><b>1.1 OUTREACH</b></p> <p><b>By March 31, 2022</b> for the Children’s Health Outreach &amp; Initiatives (CHOI) – Medi-Cal Health Enrollment Navigators Project (Navigators Project), Contractor will have successfully engaged a minimum of <b>1,197</b> clients of the target population within the City of Long Beach through an outreach/in-reach contact.</p> <table><tr><td><u>Agency Name</u></td><td><u>Numbers</u></td></tr><tr><td>City of Long Beach</td><td>1,197</td></tr><tr><td><b>Total</b></td><td><b>1,197</b></td></tr></table> <p>“<b>Successfully engaged</b>” is defined as having documented agency outreach contacts (see Implementation Activities 1.1d and Methods of Evaluating Objectives 1.1c)</p> <p>An “<b>outreach or in-reach contact</b>” is defined as speaking directly either in person or by telephone with a client or potential client(s) for <b>at least eight (8) minutes</b> 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.</p>	<u>Agency Name</u>	<u>Numbers</u>	City of Long Beach	1,197	<b>Total</b>	<b>1,197</b>	<p>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 Kids and other no or low-cost health programs. Submit to County of Los Angeles Department of Public Health (Public Health) for approval.</p> <p>1.1b Schedule outreach and maintain a list or calendar of sites, dates, and times.</p> <p>1.1c Conduct outreach at events, (e.g., presentations, fairs, etc.) and complete event summaries. Event summaries to include site, date, name of outreach worker(s), flyers, number of individuals contacted, sign-in sheets, if appropriate, and materials presented.</p> <p>1.1d Conduct outreach (e.g., telephone outreach, 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.</p> <p>1.1e Enter documentation of outreach numbers into CHOI database.</p>	<p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p>	<p>1.1a Public Health letters of approval and materials will be kept on file.</p> <p>1.1b Documents will be kept on file and summary of events will be submitted with monthly reports to Public Health.</p> <p>1.1c Completed documents will be kept on file and number of participants will be reported to Public Health in monthly reports.</p> <p>1.1d Completed documentation will be kept on file and number of participants will be reported to Public Health in monthly reports.</p> <p>1.1e Data system will be queried to generate outreach numbers.</p>
<u>Agency Name</u>	<u>Numbers</u>								
City of Long Beach	1,197								
<b>Total</b>	<b>1,197</b>								

**Scope of Work**  
**Children's Health Coverage: Outreach, Enrollment, Utilization and Retention Services**  
**Medi-Cal Health Enrollment Navigators Project (AB74)**  
**Term: July 1, 2021 – March 31, 2022**

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 Public Health.

MEASURABLE OBJECTIVE(S)		IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION						
<b>2.1 APPLICATION ASSISTANCE</b>  <b>By March 31, 2022</b> for the CHOI Navigators Project, Contractor will have completed applications for a minimum of <b>747</b> clients within the City of Long Beach for Medi-Cal, Healthy Kids and other no/low cost plans. Contractor and subcontractor will also provide clients with screening and referrals to appropriate health programs or health agencies for substance abuse disorder services; mental health services; and federally-eligible Medi-Cal enrollees, and Whole Person Care Services.  <table><tr><td><u>Agency Name</u></td><td><u>Numbers</u></td></tr><tr><td>City of Long Beach</td><td>747</td></tr><tr><td><b>Total</b></td><td><b>747</b></td></tr></table>  "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.  "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, Public Health, early detection programs, legal services for health issues, substance abuse disorder services, mental health services, federal Medi-Cal, etc.). Does not include referrals for shelter, food, and other non-direct medical needs.		<u>Agency Name</u>	<u>Numbers</u>	City of Long Beach	747	<b>Total</b>	<b>747</b>	<p>2.1a Develop, or review and revise, enrollment protocol. Submit to Public Health for approval.</p> <p>2.1b Conduct enrollment activities utilizing Public Health approved client intake form.</p> <p>2.1c Enter data from Public Health approved forms into CHOI data system utilizing appropriate codes.</p> <p>2.1d Develop, or review and revise, referral protocol and submit to Public Health for approval.</p> <p>2.1e Screen and refer clients for appropriate services. Document referral information with appropriate codes on client intake form or appropriate Public Health approved forms.</p>	<p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p>	<p>2.1a Public Health letters of approval and materials will be on file.</p> <p>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 Public Health. Printed documents of electronically submitted applications will be made available upon Public Health request.</p> <p>2.1c For monthly reports, Public Health data system will be queried to generate number of applications submitted.</p> <p>2.1d Public Health letters of approval on file.</p> <p>2.1e Maintain client intake forms with services/program referral information.</p>
<u>Agency Name</u>	<u>Numbers</u>									
City of Long Beach	747									
<b>Total</b>	<b>747</b>									

**Scope of Work**  
**Children's Health Coverage: Outreach, Enrollment, Utilization and Retention Services**  
**Medi-Cal Health Enrollment Navigators Project (AB74)**  
**Term: July 1, 2021 – March 31, 2022**

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 Public Health.**

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
<p>2.2 By March 31, 2022, Contractor 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.</p> <p>"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 <b>agency effort</b> to ascertain enrollment status. A minimum of three (3) attempted calls must be made and documented unless successful contact has been made.</p>	2.2a Develop, or review and revise, enrollment verification protocol. Submit to Public Health for approval.	7/1/21-3/31/22	2.2a Letter(s) of Public Health approval and materials will be kept on file.
	2.2b Conduct enrollment verification and troubleshooting using Public Health approved enrollment verification and troubleshooting forms.	7/1/21-3/31/22	2.2b Completed client enrollment verification and troubleshooting forms/reports will be kept on file.
	2.2c Enter data from Public Health approved forms into CHOI data system.	7/1/21-3/31/22	2.2c Public Health data system will be queried to generate number of clients for whom enrollment status has been investigated in monthly reports submitted to Public Health.
<p>2.3 By March 31, 2022, Contractor will have confirmed enrollment with respect to 75% of client applications assisted with, or facilitated by, Contractor as measured in Objective 2.1.</p> <p>This objective documents <b>enrollment outcome</b>.</p> <p>"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.</p>	2.3a Document dates of enrollment follow-up and enrollment status on enrollment verification and troubleshooting form.	7/1/21-3/31/22	2.3a Completed client enrollment verification and troubleshooting forms/reports will be kept on file.
	2.3b Enter data from Public Health approved forms into CHOI database.	7/1/21-3/31/22	2.3b CHOI data system will be queried to generate number of clients who have been confirmed enrolled in monthly reports submitted to Public Health.



Scope of Work  
 Children's Health Coverage: Outreach, Enrollment, Utilization and Retention Services  
 Medi-Cal Health Enrollment Navigators Project (AB74)

**Term: July 1, 2021 – March 31, 2022**

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 Public Health.**

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION						
<p><b>3.1 TROUBLESHOOTING ASSISTANCE</b></p> <p><u>By March 31, 2022</u> for the CHOI Navigators Project, Contractor will provide ongoing assistance to <b>1,035</b> clients experiencing problems with enrollment, utilizing benefits, or retention.</p> <table><tr><td><u>Agency Name</u></td><td><u>Numbers</u></td></tr><tr><td>City of Long Beach</td><td>1,035</td></tr><tr><td><b>Total</b></td><td><b>1,035</b></td></tr></table> <p>"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 documented unless successful contact has been made.</p>	<u>Agency Name</u>	<u>Numbers</u>	City of Long Beach	1,035	<b>Total</b>	<b>1,035</b>	<p>3.1a Develop, or review and revise, utilization protocol and submit to Public Health for approval.</p> <p>3.1b Conduct troubleshooting/problem solving for clients. Document results on appropriate forms.</p> <p>3.1c Enter data from Public Health approved forms into CHOI database.</p>	<p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p>	<p>3.1a Letter(s) of Public Health approval and materials will be kept on file.</p> <p>3.1b Completed forms will be kept on file and number of participants will be documented in monthly reports to Public Health.</p> <p>3.1c CHOI database will be queried to generate numbers of clients receiving ongoing assistance in monthly reports submitted to Public Health.</p>
<u>Agency Name</u>	<u>Numbers</u>								
City of Long Beach	1,035								
<b>Total</b>	<b>1,035</b>								
<p><b>3.2</b> By March 31, 2022, Contractor 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</p> <p>"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.</p>	<p>3.2a Develop, or review and revise, utilization protocol and submit to Public Health for approval.</p> <p>3.2b Conduct utilization assistance and document results on utilization forms using the appropriate codes.</p> <p>3.2c Enter data from Public Health approved utilization forms into Public Health CHOI database.</p>	<p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p>	<p>3.2a Letter(s) of Public Health approval and materials will be kept on file.</p> <p>3.2b Completed forms will be kept on file and number of participants will be documented in monthly reports to Public Health.</p> <p>3.2c Public Health data system will be queried to generate number of clients offered utilization assistance at 4-6 months in monthly reports submitted to Public Health.</p>						

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

MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
<p>4.1 By March 31, 2022, Contractor 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.</p> <p>"Offer redetermination assistance" is defined as attempting to contact 100% of clients and making successful contact with 65% of clients either in-person or by telephone to determine whether redetermination assistance is desired. A minimum of three (3) attempted calls must be made and documented unless successful contact has been made.</p>	<p>4.1a Develop, or review and revise, redetermination protocol and submit to Public Health for approval.</p> <p>4.1b Conduct redetermination assistance and document results on redetermination forms using the appropriate codes.</p> <p>4.1c Enter data from Public Health approved redetermination forms into CHOI database.</p>	<p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p>	<p>4.1a Letter(s) of Public Health approval and materials will be kept on file.</p> <p>4.1b Completed forms will be kept on file and number of participants will be documented in monthly reports to Public Health via CHOI database.</p> <p>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 Public Health.</p>

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MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION						
<p><b>4.2 REDETERMINATION ASSISTANCE</b></p> <p>By March 31, 2022, Contractor will provide redetermination assistance to:</p> <p>1. Clients who submitted their original application elsewhere, but have requested redetermination assistance from Contractor; and/or</p> <p>2. Clients who submitted their original application with the Contractor and have already renewed that coverage at least one time since their original enrollment confirmation date.</p> <p><b><u>By March 31, 2022</u></b>, for the CHOI Navigators Project, Contractor will provide redetermination and renewal assistance to <b><u>530</u></b> clients needing assistance with their renewal/redetermination documents.</p> <table><tr><td><b><u>Agency Name</u></b></td><td><b><u>Numbers</u></b></td></tr><tr><td><u>City of Long Beach</u></td><td><u>530</u></td></tr><tr><td><b>Total</b></td><td><b>530</b></td></tr></table> <p>"Provide redetermination assistance" is defined as helping clients to complete health insurance re-certification/renewal paperwork.</p>	<b><u>Agency Name</u></b>	<b><u>Numbers</u></b>	<u>City of Long Beach</u>	<u>530</u>	<b>Total</b>	<b>530</b>	<p>4.2a Conduct redetermination assistance and document on Public Health approved Intake Form into CHOI database.</p> <p>4.2b Enter data from CHOI approved Intake Form into CHOI database data system.</p>	<p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p>	<p>4.2a Completed forms will be kept on file.</p> <p>4.2b CHOI data system will be queried to generate number of "non-agency" clients receiving redetermination assistance in monthly reports submitted to Public Health.</p>
<b><u>Agency Name</u></b>	<b><u>Numbers</u></b>								
<u>City of Long Beach</u>	<u>530</u>								
<b>Total</b>	<b>530</b>								

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**Children's Health Coverage: Outreach, Enrollment and Retention Services**  
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MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
<p>5.1 By March 31, 2022, Contractor 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).</p> <p>"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 Public Health) who are contacted by Contractor 14 months later to determine enrollment status.</p>	<p>5.1a Develop, or review and revise, retention protocol. Submit to Public Health for approval</p> <p>5.1b Conduct retention activities and document results on retention verification documents.</p> <p>5.1c Submit data from retention verification documents to Public Health.</p>	<p>7/1/21-3/31/22</p> <p>Public Health will determine the date to conduct the 14-month Retention Survey</p>	<p>5.1a Letters of Public Health approved materials will be kept on file.</p> <p>5.1b Completed retention verification document will be kept on file and results submitted to Public Health as required.</p> <p>5.1c Public Health will compute contractor retention rate and report summary of results to Contractor.</p>
<p>6.1 By March 31, 2022, Contractor will enter data on program participants into CHOI database system to monitor, facilitate, and evaluate health insurance enrollment and retention.</p> <p><i>Please note: For clients assisted through various funds, Contractor will enter data in the CHOI database system under the appropriate Funding Sources.</i></p> <p>"Enter data" is defined as directly entering required data elements into the Public Health web-based data system available to all contractors.</p>	<p>6.1a Contractor will install any necessary computer hardware or software in order to access the Internet.</p> <p>6.1b Ensure that appropriate staff are trained on data entry AND participate in all Public Health required and uninitiated data meetings, updates, and discussions.</p> <p>6.1c Enter data into CHOI database</p> <p>6.1d Run monthly report and send signed copy to Public Health.</p> <p>6.1e Ensure Public Health-approved latest forms and documents are utilized and on file.</p>	<p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p>	<p>6.1a Contractor will demonstrate the ability to access the Internet.</p> <p>6.1b Documentation of training and issuance of username and password for data input.</p> <p>6.1c CHOI Database</p> <p>6.1d Maintain copies of signed monthly reports on file.</p> <p>6.1e Maintain latest forms and documents on file.</p>

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MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
<p>7.1 By March 31, 2022, Contractor will ensure that 100% of enrollment staff, including staff at subcontracting agencies, are fully trained to provide outreach, enrollment, utilization, and retention services.</p> <p>"Fully trained" is defined as participation in Public Health required and approved trainings and any pertinent programmatic updates for staff providing services. Additional Public Health process trainings (e.g., Public Health forms and data system updates), may be required as necessary.</p>	<p>7.1a Attend all required Public Health approved trainings. A list of required trainings will be provided to Contractors by Public Health.</p> <p>7.1b Contractor enrollment staff shall attend update trainings for new or changed initiatives/programs as required or at a minimum, every 2 years.</p>	<p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p>	<p>7.1a Maintain certificates of attendance in employee files. Document names of new staff attending the required trainings in the monthly reports to Public Health.</p> <p>7.1b Maintain certificates of attendance in employee files. Document names of staff attending updated trainings in the monthly reports to Public Health.</p>
<p>8.1 By March 31, 2022, Contractor will participate in a minimum of 80% of the convened contractor meetings.</p> <p>"Participate" is defined as attendance by at least one representative from the contracting agency.</p>	<p>8.1a Attend Contractors' meetings.</p>	<p>7/1/21-3/31/22</p>	<p>8.1a Document names of individuals attending monthly Contractor meeting in monthly reports to Public Health.</p>

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MEASURABLE OBJECTIVE(S)	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATING OBJECTIVE(S) AND DOCUMENTATION
9.1 By March 31, 2022, Contractor 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).	<p>9.1a Contractor staff shall work with Public Health for compilation of data, review of outreach efforts, and tracking subcontractors' activities and special projects.</p> <p>9.1b Contractor staff shall attend Public Health training on CHOI data system and other electronic application submission system(s) implemented in Los Angeles county.</p> <p>9.1c Contractor staff shall utilize CHOI data system and work with Public Health to identify implementation barriers.</p>	<p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p>	<p>9.1a Maintain all materials/tools, records of workload reports, enrollment figures and data on file.</p> <p>9.1b Document attendance in monthly reports submitted to Public Health.</p> <p>9.1c Document utilization and participation in monthly reports submitted to Public Health.</p>
10.1 By March 31, 2022, Contractor will conduct 100% of Quality Improvement Plan (QIP) Activities	<p>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.</p> <p>10.1b Conduct QIP activities.</p>	<p>7/1/21-3/31/22</p> <p>7/1/21-3/31/22</p>	<p>10.1a Submit QIP to Public Health for approval. Letter of QIP approval will be maintained on file.</p> <p>10.1b Document QIP activities in monthly reports to Public Health.</p>
<p>11.1 By March 31, 2022, Contractor will ensure that they identify a plan for sustainable funding to continue CHOEUR services beginning April 1, 2022.</p> <p><i>Funding for Children's Health Outreach, Enrollment, Utilization, and Retention (CHOEUR) will end on March 31, 2022.</i></p>	11.1a Develop, a sustainability plan which must include partnership with Health Care plans and may also include identification of state and/or federal funding, available grant opportunities, and/or opportunities to leverage existing funds or efforts.	7/1/21-3/31/22	11.1a Submit Plan to Public Health for approval. Letter of approval will be maintained on file.

**SCHEDULE****CITY OF LONG BEACH DEPARTMENT OF HEALTH & HUMAN SERVICES****CHILDREN'S HEALTH OUTREACH, ENROLLMENT, UTILIZATION AND RETENTION  
SERVICES****MEDI-CAL HEALTH ENROLLMENT NAVIGATORS PROJECT (AB74)**

	<u>Budget Period</u> July 1, 2021 through <u>March 31, 2022</u>
Full-Time Salaries	\$ 84,259
Employee Benefits @ 60.50%	\$ 50,977
Total Full-Time Salaries and Employee Benefits	\$ 135,236
Part-Time Salaries	\$ 0
Employee Benefits @ %	\$ 0
Total Part-Time Salaries and Employee Benefits	\$ 0
<b>Total Salaries and Employee Benefits</b>	<b>\$ 135,236</b>
Operating Expenses	\$ 922
Technology Services Expenses	\$ 5,915
Indirect Cost @ 10% of Salaries	\$ 8,426
<b>TOTAL PROGRAM BUDGET</b>	<b>\$ 150,499</b>