This Agreement with Washington State Department of Health and Social Services, Aging and Long-Term

Department **Human Services** Division 003 Fund 124 Program 511

Program 020 Subprogram 313, 314

Purpose of Grant (Brief description of work to be performed) Caregiver Training

Support Administration (ALTSA), provides funding authority (no maximum award) to Snohomish County to reimburse the County and contracted agencies for the costs of providing orientation, caregiving education, and Continuing Education to paid home care workers serving Medicaid eligible clients. The County will be reimbursed an administrative fee of 5% of the amount of class time for home care agency providers. This is a fee for service agreement with no maximum contract amount; budget estimates are based upon projected activity. Existing/ongoing program X Yes New program Yes Source of grant funding: Federal State Local Other Grant Term: From 7/1/2023 to 6/30/2024 Grantor: Department of Social and Health Services, State of WA Grant Award \$ 603,750 Is match required: Yes No If yes, match amount required: Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. DAC _____ Amount _____ Amount Total Resources \$603,750 **EXPENDITURES** \$28,750 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. Classification # FTEs **Total FTEs** 2. Pass Thru (Estimated cost) \$575,000

Total Expenditures \$603,750

Department **Human Services** Division 003 Fund 124 Program 511,543

Program 020 Subprogram 313, 314, 316, 321, 324, 325, 326, and 327

Purpose of Grant (Brief description of work to be performed) State Federal Services Agreement
This Agreement with Washington State Department of Health and Social Services, Aging and Long-Term
Support Administration (ALTSA), combines funds to support several ongoing services and activities into one
award. Services to be provided include: Case Management services for Medicaid financed home care and
Chore service, and Home Care Contract Management. Other services include Senior Information and
Assistance, Ethnic Meal Transportation, Stabilized Housing, Non-Core Case Management, Adult Day Health,
State Family Caregiver Support, Kinship Caregiver Support Program, Senior Drug Education, Home Delivered
Meals Expansion, Senior Farmer's Market Nutrition, Care Transitions, Program of All-Inclusive Care for the
Elderly, State Matching Funds for Federal OAA American Rescue Plan, and funds to support administration
of these activities.

Existing/ongoing progra	m 🛛 Yes New program 🗌 Yes	
Source of grant funding	: Federal 🛛 State 🔲 Local 🗌 O	ther 🗌
Grant Term: From 7/1/2	2023 to 6/30/2024	
Grantor: Department of S	ocial and Health Services, State of WA	Grant Award \$14,989,966*
Is match required: Xes	S No If yes, match amount re	quired: \$364,230
Match Source (General Fun	nd, Patient Fees, In-Kind, etc.). If County	funded, enter DAC.
County General	DAC 124-3045439700	Amount \$ 70,246
GF Program Support	DAC 124-3045439703	Amount <u>\$125,752</u>
SUBTOTAL COUNTY FUNDE	ED MATCH	\$195,998
State grant revenues used a	as Match ** <u>included in Grant Award**</u>	Amount <u>\$168,232</u>
AAATCU TOTAL		\$364,230
MATCH TOTAL		3304,230
MATCH TOTAL	Total Resour	
EXPENDITURES	Total Resour	· ,
EXPENDITURES	Total Resour	rces \$15,185,964

If new FTEs are needed, complete the following. Attach additional sheet if needed.

	# FTEs	Classification
	<u>3.0</u>	Case Manager
	<u>1.0</u>	Registered Nurse
	<u>1.0</u>	Case Management Admin Assistant
	<u>1.0</u>	Case Management Supervisor
Total FTEs	<u>6.0</u>	Sum of new positions included in 2023 budget request

2. Pass Thru (Estimated cost) \$1,760,992

Total Expenditures \$15,185,964

^{*}Total grant amount anticipated for the grant term. \$12,658,172 is included in the 2023 budget request.

Department **Human Services** Division 003 Fund 124 Program 511

Program 020, Subprograms 310, 311, 317, 318, 320, 323, 347

Purpose of Grant (Brief description of work to be performed) Older Americans Act

This Agreement with Washington State Department of Health and Social Services, Aging and Long-Term Support Administration (ALTSA), provides federal Older Americans Act funds which support subcontracted services from community agencies to County elder citizens age 60+ who live in their own homes. Services include Information and Assistance, Congregate Nutrition, Home Delivered Meals, Family Caregiver Support, Chronic Disease Education, Case Management, Legal Services, Stabilized Housing, Volunteer Transportation, and Client Specific Support.

A portion of these funds (10%) also finances planning, advocacy and administrative activities of the Human Services Department's Aging and Long-Term Care program which serves as the State designated Area Agency on Aging (AAA) for Snohomish County.

Total Expenditures \$3,447,819	
2. Pass Thru (Estimated cost) \$2,952,919	
Total FTEs	
If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification	
Who will complete the work? Existing FTE(s) 🗵 Existing project FTE(s) 🗌 New FTE(s) 🗌	
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$494,900	
EXPENDITURES	
Total Resources \$3,447,819	
See next page for match breakdown	
Pass Thru Match Amount \$440,235	
Internal Cost Match Amount \$114,203	
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.	
Is match required: X Yes No If yes, match amount required: \$554,438	
Grantor: Department of Social and Health Services, State of WA Grant Award \$2,893,381*	
Grant Term: From 1/1/2023 to 9/30/2024	
Source of grant funding: Federal State Local Other Other	
Existing/ongoing program X Yes New program Yes	

Purpose of Grant (Brief description of work to be performed) Older Americans Act Cont.

*Total grant award anticipated. Historically, the Grantor has prepared a unilateral amendment prior to the end of the federal fiscal year in compliance with federal requirements to obligate funding.

Match Detail

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

INTERNAL COSTS

County General DAC 124-3045119700 Amount \$68,858

State grant revenues included in State/Fed Services Agreement Amount \$45,345

SUBTOTAL \$114,203

PASS THRU MATCH

County General DAC 124-3045209700 Amount \$62,000

State grant revenues and/or subcontract agency revenues Amount \$378,235

SUBTOTAL \$440,235

MATCH TOTAL \$554,438

Department **Human Services** Division 003 Fund 124 Program 020 Subprogram 346

Purpose of Grant (Brief description of work to be performed) **Medicare Enrollment and Outreach Assistance Program**

This Agreement with Washington State Of Medicare and Medicare Part D outreach, i to enroll in Medicare Part D, or to apply fo	including rural areas; and to as	sist eligible Medicare beneficiaries
Existing/ongoing program Yes Source of grant funding: Federal [Grant Term: From 10/1/23 to 9/30	State 🛛 Local 🗌 C	Other
		t Award ¢92 000 *
Grantor: Office of Insurance Commis		
Is match required: Yes No	If yes, match amount re	equired:
Match Source (General Fund, Patient	Fees, In-Kind, etc.). If Count	ty funded, enter DAC.
	DAC A	mount
	Total I	Resources \$83,000
EXPENDITURES 1. Internal Operations (Admin., Operations)	s, Direct Service, etc.) (Estimated Co	ost) \$3,000
Who will complete the work? Existing	FTE(s) Existing project I	FTE(s) New FTE(s)
If new FTEs are needed, complete the # FTEs Classifica		I sheet if needed.
Total FTEs		
2. Pass Thru	(Estimated cost)	\$80,000

Total Expenditures \$83,000

^{*}Total grant amount anticipated for grant term. \$41,500 is included in the 2023 budget request.

Department **Human Services** Division 003 Fund 124 Program 543

Purpose of Grant (Brief description of work to be performed) **Care Consultation Services for Veteran Directed Home Services:** This Agreement with Washington State Department of Health and Social Services, Aging and Long-Term Support Administration (ALTSA), provides funding for the Case Management program to assist eligible veterans with choosing and accessing various home care services available under the program. This is a fee for service agreement with no maximum contract amount; budget estimates are based upon current and projected activity.

		Total F	xpenditures \$4	800
2. Pass Thru		(Estimated cost)	\$0	
Total FTEs				
# F 	TEs Classification			
	•	llowing. Attach additior	nal sheet if needed.	
Who will complete	the work? Existing F7	ΓΕ(s) 🔀 Existing projec	ct FTE(s) New F	TE(s)
1. Internal Opera	ations (Admin., Operations, D	irect Service, etc.) (Estimated	cost) \$4,800	
EXPENDITURES				
		Tota	l Resources \$4	4,800
	[DAC	Amount	
		DAC	Amount	
Match Source (Ge	eneral Fund, Patient Fe	ees, In-Kind, etc.). If Cou	ınty funded, enter D	OAC.
Is match required:	Yes No	If yes, match amount	required:	
Grantor: Departm	nent of Social and Hea	llth Services, State of W	'A Grant Award \$4	,800
Grant Term: Fro	om 10/1/2023 to 9/3	0/2024		
Source of grant	funding: Federal	State \(\sum_{\colored} \) Local \(\sum_{\colored} \)	Other	

Department **Human Services** Division 003 Fund 124 Program 511

Program 020, Subprogram 313

Purpose of Grant (Brief description of work to be performed) **Medicaid Transformation Project Demonstration – MAC/TSOA Implementation:** This Agreement with Washington State Department of Health and Social Services, Aging and Long-Term Support Administration (ALTSA), provides funding in support of Long Term Supports and Services (LTSS) for the aging population. Medicaid Alternative Care (MAC) supports unpaid family caregivers, avoiding or delaying the need for more intensive Medicaid-funded services. This benefit package is for individuals who are eligible for Medicaid but not currently accessing Medicaid-funded services. Tailored Supports for Older Adults (TSOA) offers a limited set of services and supports to help individuals avoid or delay the need for Medicaid-funded services. This is an eligibility category and benefit package for people "at risk" of future Medicaid LTSS use, who do not currently meet Medicaid financial eligibility criteria. This is a fee for service agreement with a maximum contract amount. Actual revenues are based on deliverables and actual number of clients served.

 EXPENDITURES 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$815,000 Who will complete the work? Existing FTE(s)
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$815,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$815,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed.
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$815,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s)
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$815,000
EXPENDITURES
Total Resources \$1,647,782
DAC Amount
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.
Is match required: Yes No If yes, match amount required:
Grantor: Department of Social and Health Services, State of WA Grant Award \$1,647,782*
Existing/ongoing program Yes New program Yes Source of grant funding: Federal State Local Other Grant Term: From 1/1/2023 to 12/31/2023

^{*}Total maximum contract anticipated for grant term. \$1,316,000 budgeted in Division 003, Aging, request.