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 Yes New program Yes Source of grant funding: Federal State Local Other Grant Term: From 7/1/2024 to 6/30/2025 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 \_\_\_\_\_ DAC \_\_\_\_\_ Amount \_\_\_\_ **Total Resources** \$603,750 **EXPENDITURES** 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$28,750 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 program Yes  New program Yes  Source of grant funding: Federal State Local Other  Grant Term: From 7/1/2024 to 6/30/2025					
Grantor: <b>Department of So</b>	cial and Health Services, State of WA	Grant Award <b>\$16,198,056*</b>			
Is match required: Xes	No If yes, match amount red	quired: \$389,230			
Match Source (General Fund, 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 \$125,752			
SUBTOTAL COUNTY FUNDED MATCH		\$195,998			
State grant revenues used as Match ** included in Grant Award **  MATCH TOTAL		Amount <u>\$193,232</u> <b>\$389,230</b>			
Total Resources \$16,394,054					
EXPENDITURES					
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$14,457,429					
Who will complete the work? Existing FTE(s) $\boxtimes$ Existing project FTE(s) $\square$ New FTE(s) $\boxtimes$					

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

# FIES	Classification
2.0	Case Manager Lead

2.0 <u>Case Manager</u>

<u>1.0</u> <u>Case Management Aide</u>

Total FTEs 5.0 Sum of new positions included in 2024 budget request

**2. Pass Thru** (Estimated cost) \$1,936,625

Total Expenditures \$16,394,054

<sup>\*</sup>Total grant amount anticipated for the grant term. \$15,094,054 is included in the 2024 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 \$3,790,920				
2. Pass Thru	Estimated cost)	\$3,276,324		
Total FTEs				
# FTEs Classification	.6.			
If new FTEs are needed, complete the following				
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$514,596  Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s)				
EXPENDITURES	<i>7</i> =	4		
	Total Resou	rces \$3,790,920		
See next page for match breakdown				
Pass Thru Matcl	n Amount \$480,824	4		
Internal Cost Match	n Amount \$122,063	1		
Match Source (General Fund, Patient Fees, II	n-Kind, etc.). If County fund	ed, enter DAC.		
Is match required: Yes No If y	res, match amount required	: \$602,885		
Grantor: <b>Department of Social and Health S</b>	ervices, State of WA	Grant Award <b>\$3,188,035*</b>		
Grant Term: From 1/1/2024 to 9/30/202	5			
Source of grant funding: Federal X Sta	e Local Other			
Existing/ongoing program X Yes Nev	v 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 \$63,216

 County General
 DAC 124-3045209700
 Amount \$15,000

State grant revenues included in State/Fed Services Agreement Amount \$43,845

SUBTOTAL \$122,061

#### **PASS THRU MATCH**

County General DAC 124-3045209700 Amount \$ 47,000

State grant revenues and/or subcontract agency revenues Amount \$433,824

SUBTOTAL \$480,824

MATCH TOTAL \$602,885

Department **Human Services** Division 003 Fund 124 Program 511 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 Office of Insurance Commissioner provides funding to conduct

Medicare and Medicare Part D outreach, including rural areas; and to assist eligible Medicare beneficiaries to enroll in Medicare Part D, or to apply for the Medicare Low-income Subsidy and Medicare Savings Plans. Existing/ongoing program X Yes New program | Yes Source of grant funding: Federal State Local Other Grant Term: From 10/1/24 to 9/30/2025 Grantor: Office of Insurance Commissioner, State of WA Grant Award \$83,000\* 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 **Total Resources** \$83,000 **EXPENDITURES** 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$3,000 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 Total FTEs 2. Pass Thru (Estimated cost) \$80.000

**Total Expenditures** 

\$83,000

<sup>\*</sup>Total amount anticipated for grant term. \$41,500 (one-half) is included in the 2024 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 Expenditures \$4,800				es \$4,800	
2. Pass Thru			(Estimated cos	t) \$0	
Total FTEs					
	# FTEs CI	assification	<u> </u>		
If new FTEs are		•	llowing. Attach ad	ditional sheet if ne	eeded.
Who will comp	olete the work	? Existing FT	E(s) Existing p	project FTE(s)	New FTE(s)
1. Internal C	perations (Adm	in., Operations, D	irect Service, etc.) (EStin	nated cost) \$4,	800
EXPENDITUI	RES				
				Total Resource	s \$4,800
	<del></del>	[	DAC	Amount	
		Г	DAC	Amount	
Match Source	e (General Fun	d, Patient Fe	es, In-Kind, etc.).	If County funded,	enter DAC.
Is match requi	red: Yes	⊠ No	If yes, match am	ount required: _	
Grantor: <b>Dep</b>	artment of So	cial and Hea	lth Services, State	of WA Grant Av	vard <b>\$4,800</b>
Grant Term	n: From 10/1/	2024 to 9/3	0/2026		
Source of g	rant funding:	Federal	State \( \sum \) Local	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 Program – 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. Effective 1/1/2024, the program is revised from a Medicaid demonstration project to a regular program. This is a fee for service agreement with a maximum contract amount. Actual revenues are based on deliverables and actual number of clients served.

Existing/ongoing program Yes  Source of grant funding: Federal State Local Other  Grant Term: From 1/1/2024 to 12/31/2024						
Grantor: Department of Social and Health Services, State of WA Grant Award \$1,453,778						
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	-					
Total Resources \$1,453,778						
EXPENDITURES						
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$853,778						
Who will complete the work? Existing FTE(s) \( \subseteq \) Existing project FTE(s) \( \subseteq \) New FTE(s) \( \subseteq \)						
If new FTEs are needed, complete the following. Attach additional sheet if needed.						
# FTEs Classification						
Total FTEs 3.0 Case Manager						
2. Pass Thru (Estimated cost) \$600,000						
Total Expenditures \$1,453,778						