

CONTRACT REQUEST

(Submit 2 copies)

Expedite (Complete Items 15 and 16.)

1. Agreement/Amend. number 98-15627 A-2	2. Current transaction amount \$ 272,556	3. Agreement total \$ 562,888.00	4. Term start date and end date 1/01/99 – 6/30/02
5. Contractor's / Grantee's name Human Services Agency of San Mateo County			6. Project location (County / Statewide) San Mateo
7. Contractor's / Grantee's official contact person (name/title) Sofia Gomes, Management Analyst			8. Telephone number (650) 802-5107
9. Contractor's / Grantee's Contract/Project Manager (name/title) Elsa Dawson, Human Services Manager		10. Telephone number (650) 802-5107	11. Fax number (650) 802-5026

12. **Agreement Type** (check one)

<input type="checkbox"/> 1 Consultant [Not for universities or Gov't. entities.]	<input type="checkbox"/> 6 State agency [Agreements with a California State University campus or the Trustees of CSU or another state entity that will be paid per SAM 8752.]
<input checked="" type="checkbox"/> 2 Direct service / Subvention / Grant	<input type="checkbox"/> 7 Other [Stipends, data access, room/booth rental, classified ads, etc.]
<input type="checkbox"/> 3 Personal service	<input type="checkbox"/> 8 CMU Use Only
<input type="checkbox"/> 4 Business service	<input type="checkbox"/> 9 Incoming Funds
<input type="checkbox"/> 5 Public works	

13. **Business Type** (check one)

<input type="checkbox"/> 1 For profit entity[Individual, partnership, joint venture, unincorporated or incorporated organization, commercial business, etc.]
<input type="checkbox"/> 2 Nonprofit entity[Public or private incorporated organization, etc. CSU Foundation. Maintain proof of nonprofit status on file.]
<input checked="" type="checkbox"/> 3 Government entity[City, County, California State agency, CSU campus/Trustees, federal agency, another State, etc.]
<input type="checkbox"/> 4 Other[Public entities (e.g., UC campus/Regents, school/water district), other municipality, joint powers agency, etc.]

14. Is this agreement federally funded in whole or part? (check one) Yes No

15. If expedite handling is requested; choose a reason below and complete item 16.

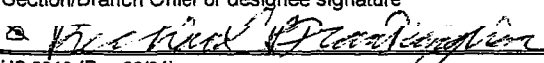
<input type="checkbox"/> Emergency. <u>Immediate</u> preservation of life or state property.
<input type="checkbox"/> Cash flow problems of the Contractor.
<input checked="" type="checkbox"/> Politically sensitive and of interest to the Governor's Office, the Legislature, or the Director's Office.
<input type="checkbox"/> Other urgent need. Explain in item 16.

16. If expedite handling is requested, explain the following issues in the space below or attach a separate justification.

a. Why is expedite handling needed, and	CMU use only <input type="checkbox"/> Approved <input type="checkbox"/> Disapprove
b. What negative consequences will occur if your request is not approved, and	
c. If applicable, why is your agreement being processed late?	

The federal government lifted the sunset date for expenditure of section 1931(b) outreach funds. Contracts for the county section 1931(b) outreach funds were scheduled to terminate on 6/30/01 as all funds had been allocated. However, the Department became aware of unspent funds by the counties for fiscal year 2000/2001. The Legislature reappropriated funds for 2001-02 to continue the contracts for one additional year, to allow a transfer of unspent funds from fiscal year 2000/2001 to fiscal year 2001/2002. The cumulative total contract amount will remain the same. All outreach efforts must be completed by 6/30/02. This represents the last year in which section 1931(b) outreach funds will be available.

17. **Program contact / Agreement authorization**

Program analyst contact name and email address Barbra Liberty BLiberty@dhs.ca.gov		Telephone number (916) 657-0863	Fax number (916) 657-3224
Division name Medi-Cal Policy Division		Section name Outreach and Education	
Mailing address (Street Address, Room Number, P.O. Box) 714 "P" Street, Room 1650		City Sacramento	State Zip code CA 95814
Section/Branch Chief or designee signature 	Printed name/title _____	Date signed 7/11/02	

AGREEMENT SUMMARY

STD 215 (NEW 02/98)

AGREEMENT NUMBER

AMENDMENT NUMBER

98-15627

A-2

CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED

1. CONTRACTOR'S NAME Human Services Agency of San Mateo County	2. FEDERAL I.D. NUMBER 94-6000532
--	---

3. AGENCY TRANSMITTING AGREEMENT California Department of Health Services	4. DIVISION, BUREAU, OR OTHER UNIT Outreach and Education	5. AGENCY BILLING CODE 085062
---	---	---

6. NAME AND TELEPHONE NUMBER OF CONTRACT ANALYST FOR QUESTIONS REGARDING THIS AGREEMENT
Allan Chinn 323-1764

7. HAS YOUR AGENCY CONTRACTED FOR THESE SERVICES BEFORE?
 NO YES (If YES, enter prior contractor name and Agreement Number)

8. BRIEF DESCRIPTION OF SERVICES - LIMIT 72 CHARACTERS INCLUDING PUNCTUATION AND SPACES
Conduct outreach to families & increase Medi-Cal enrollment

9. AGREEMENT OUTLINE (Include reason for Agreement: Identify specific problem, administrative requirement, program need or other circumstances making the Agreement necessary; include special or unusual terms and conditions.)
This amendment extends the contract from January 1, 1999 to June 30, 2002, by transferring \$272,556 in unspent funds from fiscal year 2000/2001 to fiscal year 2001/2002. The federal government lifted the sunset date on the use of the section 1931 (b) funds. Funds were reappropriated to allow this transfer of funds. The accumulative total contract amount will remain the same.

10. PAYMENT TERMS (More than one may apply.)

MONTHLY FLAT RATE QUARTERLY ONE -TIME PAYMENT PROGRESS PAYMENT

ITEMIZED INVOICE WITHHOLD _____ % ADVANCED PAYMENT NOT TO EXCEED

REIMBURSEMENT/REVENUE \$ _____ or _____ %


OTHER (Explain) _____

11. PROJECTED EXPENDITURES	FUND TITLE	ITEM	F.Y.	CHAPTER	STATUTE	PROJECTED EXPENDITURES
	SEE ATTACHED					\$
						\$
						\$

OBJECT CODE **PRWORA 01-95926-9912-702-03** AGREEMENT TOTAL \$ **562,888**

OPTIONAL USE **TITLE XIX 01-95917-9912-702-03** AMOUNT ENCUMBERED BY THIS DOCUMENT
\$ \$0 transfer funds

I CERTIFY upon my own personal knowledge that the budgeted funds for the current budget year are available for the period and purpose of the expenditure stated above. PRIOR AMOUNT ENCUMBERED FOR THIS AGREEMENT
\$ \$562,888

ACCOUNTING OFFICER'S SIGNATURE  DATE SIGNED TOTAL AMOUNT ENCUMBERED TO DATE
\$ \$562,888

12. AGREEMENT	TERM		TOTAL COST OF THIS TRANSACTION	BID, SOLE SOURCE, EXEMPT
	From	Through		
Original	1/1/99	9/30/99	\$ 143,374	Exempt
Amendment No. 1	1/1/99	6/30/01	\$ 419,514	Exempt
Amendment No. 2	1/1/99	6/30/02	\$ 0	Exempt
Amendment No. 3			\$	Exempt
TOTAL			\$ 562,888	

(Continue)

11. PROJECTED EXPENDITURES

FUND TITLE	ITEM	FY	CHAPTER	STATUTE	PROJECTED EXPENDITURES
Health Care Deposit Fund	4260-101-0890	98/99	324	1998	\$ 81,142
Health Care Deposit Fund	4260-603-0912	99/00	50	1999	\$ 143,374
Health Care Deposit Fund	4260-603-0912	00/01	52	2000	\$ 338,372
Health Care Deposit Fund	4260-603-0912	01/02	106	2001	\$0
OBJECT CODE	PRWORA 01-95926-9912-702-03		AGREEMENT TOTAL	\$ 562,888	
OPTIONAL USE	TITLE XIX 01-95917-9912-702-03		AMOUNT ENCUMBERED BY THIS DOCUMENT \$0 transfer funds		

AGREEMENT SUMMARY

STD. 215 (NEW 02/98)

13. BIDDING METHOD USED:

- REQUEST FOR PROPOSAL (RFP) INVITATION FOR BID (IFB) USE OF MASTER SERVICE AGREEMENT
(Attach justification if secondary method is used)
- SOLE SOURCE CONTRACT EXEMPT FROM BIDDING OTHER *(Explain)* N/A amendment
(Attach STD. 821) *(Give authority for exempt status)*

NOTE: Proof of advertisement in the State Contracts Register or an approved form STD. 821, Contract Advertising Exemption Request, must be attached

14. SUMMARY OF BIDS *(List of bidders, bid amount and small business status) (If an amendment, sole source, or exempt, leave blank)*

15. IF AWARD OF AGREEMENT IS TO OTHER THAN THE LOWER BIDDER, PLEASE EXPLAIN REASON(S) *(If an amendment, sole source, or exempt, leave blank)*

16. WHAT IS THE BASIS FOR DETERMINING THAT THE PRICE OR RATE IS REASONABLE?

17. JUSTIFICATION FOR CONTRACTING OUT *(Check one)*

- Contracting out is based on cost savings per Government Code 19130(a). The State Personnel Board has been so notified.
- Contracting out is justified based on Government Code 19130(b). Justification for the Agreement is described below.

Justification:

18. FOR AGREEMENTS IN EXCESS OF \$5,000, HAS THE LETTING OF THE AGREEMENT BEEN REPORTED TO THE DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING?

- NO YES N/A

19. HAVE PCC§ 10410 AND 10411 DEALING WITH CONFLICT OF INTEREST BEEN COMPLIED WITH?

- NO YES N/A

20. FOR CONSULTING AGREEMENTS, DID YOU REVIEW ANY CONTRACTOR EVALUATIONS ON FILE WITH THE DGS LEGAL OFFICE?

- NO YES NONE ON FILE N/A

21. IS A SIGNED COPY OF THE FOLLOWING ON FILE AT YOUR AGENCY FOR THIS CONTRACTOR?

- A. CONTRACTOR CERTIFICATION CLAUSES NO YES N/A
- B. STD. 204, VENDOR DATA RECORD NO YES N/A

22. REQUIRED RESOLUTIONS ARE ATTACHED

- NO YES N/A

23. ARE DISABLED VETERANS BUSINESS ENTERPRISE GOALS REQUIRED? *(If an amendment, explain changes, if any)*

- NO *(Explain below)* YES *(If YES complete the following)*

DISABLED VETERAN BUSINESS ENTERPRISES: _____ % OF AGREEMENT

Good faith effort documentation attached if 3% goal is not reached.

We have determined that the contractor has made a sincere good faith effort to meet the goal.

Explain: N/A - Direct Service Contract.

Signature, if exempted at DHS's discretion.

24. IS THIS A SMALL BUSINESS CERTIFIED BY OSBCR?

- NO YES *(Indicate Industry Group)*

SMALL BUSINESS REFERENCE NUMBER

25. IS THIS AGREEMENT (WITH AMENDMENTS) FOR A PERIOD OF TIME LONGER THAN ONE YEAR? *(If YES, provide justification)*

- NO YES

Multi-year contract allowed per Admin. Relief.

I certify that all copies of the referenced Agreement will conform to the original Agreement sent to the Department of General Services.

SIGNATURE/TITLE

DATE SIGNED

[Handwritten mark]

STATE OF CALIFORNIA
STANDARD AGREEMENT AMENDMENT
 STD. 213 A (NEW 02/98)

AGREEMENT NUMBER 98-15627	AMENDMENT NUMBER A-2
-------------------------------------	--------------------------------

1. This Agreement is entered into between the State Agency and Contractor named below:

STATE AGENCY'S NAME
 California Department of Health Services

CONTRACTOR'S NAME
 Human Services Agency of San Mateo County

2. The term of this Agreement is 1/1/99 through 6/30/02

3. The maximum amount of this Agreement is: \$562,888
 Five Hundred Sixty Two Thousand Eight Hundred Eighty Eight dollars

4. The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

1. This agreement is extending the term of the agreement for one year: with no additional cost to the State. The effective date of this amendment is June 30, 2001.
2. This agreement transfers \$272,556 from fiscal year 2000/2001 to fiscal year 2001/2002, replacing Exhibit BBB entitled Budget Fiscal Year 2000-2001 with Exhibit BBB-1 entitled Budget Fiscal Year 2000-2001, and incorporating a new Budget, Exhibit BBBB entitled Budget Fiscal Year 2001-2002; and replacing Exhibit C-1 entitled Scope of Work for Fiscal Year 2000 - 2001, with Exhibit C-2 entitled Scope of Work for Fiscal Year 2000 -2001, and incorporating a new Scope of Work, Exhibit CCCC entitled Scope of Work Fiscal Year 2001-2002.



3. Paragraph 3C is amended as follows:

C) For fiscal period July 1, 2000 to June 30, 2001.

- (1) The maximum amount payable by DHS to the Human Services Agency of San Mateo County, shall not exceed ~~\$338,372~~ \$65,816.
- (2) The county match shall be provided by the Human Services Agency of San Mateo County, and shall not exceed ~~\$34,194~~ \$27,347.
- (3) The maximum amount resulting from the Federal share of cost and the county match shall not exceed ~~\$372,566~~ \$93,163.

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR		CALIFORNIA Department of General Services Use Only
CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.) Human Services Agency of San Mateo County		
BY (Authorized Signature) 	DATE SIGNED (Do not type)	
PRINTED NAME AND TITLE OF PERSON SIGNING Maureen Borland, Director		
ADDRESS 400 Harbor Blvd., Bldg. C, Belmont, CA 94002		
STATE OF CALIFORNIA		
AGENCY NAME California Department of Health Services		<input checked="" type="checkbox"/> Exempt per: W&I Code 14067
BY (Authorized Signature) 	DATE SIGNED (Do not type)	
PRINTED NAME AND TITLE OF PERSON SIGNING Edward Stahlberg, Chief, Program Support Branch		
ADDRESS 1800 3rd. Street, Rm. 455, P.O. Box 942732, Sacramento, CA 94234-7320		

4. Paragraph 3 (D) is revised to read as follows:

D. For fiscal period July 1, 2001 to June 30, 2002:

- (1) The maximum amount payable by DHS to the Human Services Agency of San Mateo County shall not exceed \$272,556.**
- (2) The county match shall be provided by the Human Services Agency of San Mateo County and shall not exceed \$27,255**
- (3) The maximum amount resulting from the federal share of cost and the county match shall not exceed \$299,811.**

5. Paragraph 3 (E) is added to read:

D E) The total maximum payable for the entire contract term is:

- (1) \$562,888 in federal share of cost.**
- (2) \$268,654 in the county match.**
- (3) \$831,542 in federal share of cost and the county match.**

6. Paragraph 4 is amended by replacing Exhibit BBB entitled Budget Fiscal Year 2000/2001 for fiscal year 2000/2001, with the attached Exhibit BBB-1, entitled Budget Fiscal Year 2000/2001, which is one page in length, revised for fiscal year 2000/2001.

7. Paragraph 4 is amended by adding the attached Exhibit BBBB entitled Budget Fiscal Year 2001/2002 for fiscal year 2001/2002, which consists of one page.

8. Paragraph 4 is amended by replacing Exhibit C-1 entitled Scope of Work for fiscal year 2000/2001 with the attached Exhibit C-2, which is four pages in length, entitled Scope of Work for fiscal year 2000/2001.

9. Paragraph 4 is amended by adding the attached Exhibit CCCC entitled Scope of Work for fiscal year 2001/2002, which consists of three pages.

10. Paragraph 2 is amended to read as follows:

2. The term of the contract shall be from January 1, 1999 through June 30, 2002.

Exhibit BBB-1
Budget Year 3
07/01/00 - 6/30/01

Budget Categories	APPROVED BUDGET 7/1/00 - 6/30/01	ADJUSTMENT	FINAL BUDGET 7/1/00 - 6/30/01	COUNTY MATCH 10% MIN
Personal Salaries:				
Admin Support 1 FTE @100% @\$46,550/Yr.	\$46,550	\$46,550	\$0	
Benefit Analyst Over time	\$7,000	\$7,000	\$0	
Outreach Coordinator 1 FTE @100% @\$48,00/Yr.	\$48,000	\$38,680	\$9,320	
Benefits Analyst 2 FTE @ 150% @\$51,480/Yr.	\$77,220	\$77,220	\$0	
Subtotals:	\$178,770	\$169,450	\$9,320	\$16,945
Fringe Benefits @ 20%	\$35,754	\$33,890	\$1,864	\$3,389
Total Personnel	\$214,524	\$203,340	\$11,184	\$20,334
Services & Supplies:				
Office Supplies	\$13,000	\$8,700	\$4,300	
Telephone Pager	\$900	\$48	\$852	
Info Line	\$5,000	\$5,000	\$0	
Program Supplies	\$18,000	\$290	\$17,710	
Event Supplies	\$13,000	\$9,032	\$3,968	
Space	\$4,725	\$4,725	\$0	
Printing	\$5,510	\$5,510	\$0	
Audit	\$0	\$0	\$0	
Postage	\$6,000	\$0	\$6,000	
Marketing Expense	\$11,000	\$0	\$11,000	
Training	\$3,861	\$991	\$2,870	
Electronic Data Processing	\$15,374	\$15,374	\$0	
Subtotals for Services and Supplies:	\$96,370	\$49,670	\$46,700	\$4,670
Equipment Expenses:				
Personal Computer	\$2,500	\$0	\$2,500	
Laptop Computer	\$2,000	\$0	\$2,000	
Printer	\$1,000	\$0	\$1,000	
FAX	\$500	\$0	\$500	
Portable Photocopier	\$1,000	\$0	\$1,000	
Travel	\$2,601	\$2,601	\$0	\$260
Subtotals Equipment Expenses:	\$9,601	\$2,601	\$7,000	\$260
Indirect Costs	\$17,877	\$16,945	\$932	
TOTAL CONTRACT AMOUNT	\$338,372	\$272,556	\$65,816	\$27,347

Exhibit BBBB
Budget Year 4
07/01/01 - 06/30/02

Budget Categories	Final Budget 7/1/01-6/30/02	COUNTY MATCH 10% MINIMUM
Personal Salaries:		
Admin Support (c step) 1FTE @ 100% @\$46,550/Yr.	\$46,550	
Benefits Analyst Over time	\$7,000	
Outreach Coordinator 1 FTE @100% @\$38,680/Yr.	\$38,680	
Benefits Analyst 2 FTE @ 150% @\$51,480/Yr.	\$77,220	
Subtotals:	\$169,450	\$16,945
Fringe Benefits @ 20%	\$33,890	\$3,389
Total Personnel	\$203,340	20,334
Services & Supplies:		
Office Supplies	\$8,700	
Telephone Pager	\$48	
Info Line	\$5,000	
Program Supplies	\$290	
Event Supplies	\$9,032	
Space	\$4,725	
Printing	\$5,510	
Audit	\$0	
Postage	\$0	
Marketing Expense	\$0	
Training	\$991	
Electronic Data Processing	\$15,374	
Subtotals:	\$49,670	\$4,967
Equipment Expenses:		
Personal Computer	\$0	
Laptop Computer	\$0	
Printer	\$0	
FAX	\$0	
Portable Photocopier	\$0	
Subtotals:	\$0	
Travel	\$2,601	\$260
Indirect Costs	\$16,945	\$1,694
TOTAL CONTRACT AMOUNT	\$272,556	\$27,255

Exhibit C-2 (4 pages)
Scope of Work
Budget Year 3
07/01/00 – 06/30/01

Proposed Program Description for Section 1931(b) Outreach Activities

The overall aim of this project is to provide access to health care coverage for 100% of the children and their families in San Mateo County. This goal is in line with that of the 100% Campaign sponsored by the Children's Partnership in cooperation with Children Now and the Children's Defense Fund.

The project will provide countywide outreach, education, training and follow-up through a network of new and existing community based organizations and outreach workers. Human Services will be the lead agency, while El Concilio will be the program lead, hiring a director of outreach with grant funds and overseeing the outreach efforts of five full-time equivalent outreach workers.

Funding in the amount of \$143,374 for FY 99-00 is being requested from the State Department of Health Services for a comprehensive outreach effort, in coordination with existing outreach, to identify and enroll children and families in San Mateo County who are eligible for Medi-Cal 1931(b), but not enrolled.

Goals

1. Increase the number of children and eligible family members enrolled in Medi-Cal or other low-cost health insurance, or with physician service providers.
2. Reach families, who are otherwise difficult to reach, through community agencies and schools, using culturally sensitive and language-appropriate educational materials.

Objectives

1. Develop a coordinated, countywide Medi-Cal outreach plan.
2. Develop and simultaneously implement multiple strategies to reach families with children in targeted areas who are Medi-Cal eligible but not enrolled. The strategies would be carried out in schools, community agencies and other locations (child care sites, faith entities, Head Starts).
3. Develop and disseminate a Medi-Cal outreach and preventative health education package which Outreach Workers can use in schools, and Community Health Workers/Community Representatives in the community and within agencies and other organizations, to inform families about the importance of accessing preventative health care for their children and available health programs.
4. Collect and analyze quantitative and qualitative information about the effectiveness of each strategy. Use this information to refine and redirect outreach resources as necessary.

The funding will target outreach and enrollment of Medi-Cal eligible children and their families. The outcomes for the outreach project during fiscal year 1999-2000 include the following:

- 4,313 children contacted during one-on-one outreach in the community
- 8,000 brochures and flyers distributed at health fairs, job fairs and other locations
- 940 individuals enrolled in Medi-Cal
- 90 families receive supportive services as a result of being rejected for Medi-Cal
- 300 individuals referred to health education classes and services

Proposed Program Description for Additional Section 1931(b) Outreach Activities

The overall goal of the proposed program remains the same as that of the original coalition: *to provide access to health care coverage for 100% of the children and their families in San Mateo County.* The overall goal will be accomplished by performing outreach activities, assisting uninsured persons with the Medi-Cal 1931(b) application process, and enrolling them in the Section 1931(b) program, Medi-Cal, or referring them to other health care programs as appropriate. To support the project, the Human Services Agency requests \$143,372 from the Department of Health Services.

The funding will target outreach and enrollment of Medi-Cal eligible children and their families. The outcomes of this portion of the project include the following:

- 600 families will be contacted during community outreach events
- 100 Medi-Cal applications will be initiated from outreach activities
- 50 families will be enrolled in Medi-Cal as a result of outreach activities
- 25 families will be referred to other health care programs as a result of outreach activities.
- 500 telephone calls will be received at the central Medi-Cal 1-800 informational telephone number.

The programs that will be included in the enrollment and/or referral process will include:

- *Section 1931(b) Medi-Cal* is a new Medi-Cal category that combines AFDC and CalWORKs eligibility criteria. It was created to ensure that families who were eligible for Medi-Cal under the old AFDC program would continue to be eligible for Medi-Cal after implementation of CalWORKs. It may cover families who receive CalWORKs as well as families who do not receive CalWORKs, but who would have been eligible for AFDC-linked Medi-Cal if AFDC were still in effect.
- *Medi-Cal* is California's Medicaid program. Medi-Cal provides health services through a federal and state medical assistance program for categorically eligible and low income persons. To be eligible, individuals must receive public assistance, be medically needy, be a medically indigent child, pregnant woman, or determined to be eligible in another category. Recent changes regarding eligibility for children and their parents enables more children to receive no-cost Medi-Cal.
- *Healthy Families Program* offers low cost health insurance for children of families whose incomes are too high to receive no-cost Medi-Cal but still fall below certain income levels. The Healthy Families program began accepting applications on June 1, 1998, with coverage beginning July 1, 1998.
- *California Children's Services (CCS)* provides diagnostic and treatment services, medical case

management, and physical and occupational therapy services to children under the age of 21 years with CCS eligible conditions. Examples of CCS eligible conditions include, but are not limited to: chronic medical conditions such as cystic fibrosis, hemophilia, cerebral palsy and heart disease, cancer, infectious diseases and traumatic injuries. Children eligible for CCS must be residents of California, must have a CCS eligible condition, and must be a family with an adjusted gross income of forty thousand dollars or less in the most recent tax year. Children in families with higher incomes may still be eligible for CCS if the estimated cost of care to the family in one year is expected to exceed 20 percent of the family's adjusted gross income.

- *Child Health and Disability Prevention (CHDP)* is a program that provides regular preventive health assessments to eligible children and youths to identify any health problems. The health assessments include health history, physical examinations, nutritional assessments, developmental assessments, laboratory tests, vision testing, hearing testing, and referrals for routine dental assessments. To be eligible for CHDP, individuals must be under 21 years of age and be eligible for Medi-Cal, or under 19 years of age with family income at or below 200% of the Federal Poverty Level, or enroll in a state preschool or Head Start program.

The project will incorporate various media and advertising strategies that can be targeted to potential eligibles countywide. This proposal includes funding for a Outreach Coordinator who will facilitate the design and development of materials, plan and coordinate the outreach strategies, and utilize the existing county resources for outreach and enrollment.

Proposed Countywide outreach strategies include:

- ~~1. Development of bilingual media materials (low literacy and reader friendly) which may include videos, posters, brochures and stuffers~~
- ~~2. Utilization of community cable TV and radio for public service announcements and programs~~
3. Research and attend community events where materials can be distributed and displayed
- ~~4. Distribution of outreach materials to all public schools in San Mateo County~~
5. Distribution of materials to parks/recreation departments, children/youth organizations, day care/child care providers
- ~~6. Distribution of stuffers in newsletters, newspapers, or utility bills~~
- ~~7. Work with the business community to increase outreach efforts to employees particularly to small businesses which may not offer health care coverage~~
8. Encourage and facilitate increased collaboration and partnerships with other service agencies, coalitions and organizations that may provide access to other sectors of the community
- ~~9. Development of a website with information and links to health care programs~~
10. Liaison with health care and other health coverage programs
- ~~11. Implement central information telephone number which offers basic information regarding Medi-Cal and transfers callers to Medi-Cal staff on demand~~
12. Offer support services as available.

Proposed Program Description for Expansion of Section 1931(b) Outreach Activities FY 00-01

The San Mateo County Human Services Agency requests \$195,000 from the Department of Health Services to support the expansion of Section 1931(b) outreach activities in San Mateo County.

The aforementioned Outreach Coordinator will be responsible for planning and coordinating the expanded outreach activities by moving beyond media and advertising strategies. The proposed expansion strategies will target primarily three existing service avenues for contracted outreach activities whereby Medi-Cal Benefit Analysts will engage directly with potentially eligible individuals and families. These existing avenues for outreach include:

- ***Women, Infant and Children (WIC) Enrollment Sessions***
The San Mateo County WIC Program is located at six sites throughout the County. At each site, the WIC program staff conduct 8 to 10 two-hour enrollment sessions during which time health access and coverage is explored.
- ***School-Hosted Events***
At various school sites throughout the county, schools in conjunction with school affiliated groups and community groups host an array of school events. School events, such as, food drives and health fairs, are quite often held during weekend and evening hours and are open to the communities at large.
- ***Mobile Health Unit Services***
The Mobile Health Unit is operated by the San Mateo County Public Health Department and is staffed with a nurse practitioner, a registered nurse, a medical assistant, a community worker, a clerical worker, a driver and a senior health nurse. The Mobile Health Unit travels throughout the County offering full health care services, such as, primary care intervention, pulmonary treatment and immunizations.

Utilizing these existing avenues for outreach, approximately the equivalent of 1.5 full time Benefit Analysts will participate in the WIC enrollment sessions, school-hosted events and Mobile Health Unit Services to initiate, assist and ultimately enroll uninsured individuals and families in the Section 1931(b) and Medi-Cal programs. The Benefit Analysts will provide individuals and families with information on Section 1931(b) and Medi-Cal, answer their questions, distribute and collect applications, provide assistance in the application process, and refer them to other health care programs as appropriate.

The expanded funding will target outreach and enrollment of Medi-Cal eligible children and their families. The outcomes for the Expansion of the 1931(b) Outreach Activities project include the following:

- 2000 families will be contacted during community outreach events
- 600 Medi-Cal applications will be initiated from outreach activities
- 200 families will be enrolled in Medi-Cal as a result of outreach efforts
- 100 families will be referred to other health care programs as a result of outreach activities

EXHIBIT CCCC (3 pages)
SCOPE OF WORK
YEAR 4
7/01/01 – 6/30/02

Proposed Program Description for Section 1931(b) Outreach Activities

The overall goal of this project is to provide access to health care coverage for 100% children and families in San Mateo County. This project will provide countywide outreach, education, training and follow through a network of new and existing community based organizations and outreach workers. To support the project, HSA requests \$280, 488 in contract funds. The funding will target outreach and enrollment of Medi-al eligible children and their families. The specific project goals are:

Goal 1: Provide Application Assistance to 800 families, (3000 individuals), potentially eligible for Medi-Cal.

- A. Objective 1: Help families enroll at Willow Clinic/ Clara Mateo Shelter.**
 - 1. **Time Line:** 7/01/01-6/30/02
 - 2. **Major Functions, Tasks and Activities**
 - a. Outstation eligibility worker at clinic
 - b. Coordinate services with Community Health Advocate from Health Services Agency
 - 3. **Responsible party**
 - a. Clara-Mateo shelter staff
 - b. Willow Clinic staff
 - c. HSA
 - 4. **Performance measure and /or deliverables**
 - a. Monitor County Data System (CDS) and Medi-Cal Eligibility Data System, (Meds), to track eligible clients
 - b. Follow-up families to make sure they enroll

- B. Objective 2: Help enroll families in North County Health Clinic and South San Francisco clinics**
 - 1. **Time Line:** 7/01/01-6/30-02
 - 2. **Major Functions, Tasks and Activities**
 - a. Outstationed eligibility worker at clinic
 - b. Coordinated activities with Health Services Agency
 - 3. **Responsible Party**
 - a. HSA
 - b. Health Clinic staff
 - 4. **Performance measure**
 - a. Monitor CDS and Meds to track eligible clients

- a. Monitor CDS and Meds to track eligible clients
- c. Follow up families to ensure they enroll

Goal 2: Initiate enrollment and informational activities to educate 1500 families about health care services available in North County utilizing the public school system.

1. **Time Line:** 7/01/01-6/30/02
2. **Major functions, Task, Activities**
 - a. Develop and sign Memorandum of Understanding with Daly City School District on outreach activities
 - b. Coordinate outreach activities with local community based organizations
3. **Responsible Party**
 - a. HSA
 - b. Daly City School District
4. **Performance measure**
 - a. Check CDS and Meds
 - b. Monitor increase in insured clients visiting public clinics

Goal 3: Develop and maintain an extensive media informational campaign educating targeted populations, within the County, on available and affordable health insurance and health care.

Objective 1: Develop multilingual printed material that is reader friendly with low literacy requirements.

1. **Time Line** 7/01/01-6/30/02
2. **Major function**
 - a. Design and develop in-house retention oriented material with advice from practicing eligibility workers.
 - b. Design and develop in-house outreach material in the prevalent non-English languages; Spanish, Tagalog, Russian, Tongan, Samoan, Chinese (Mandarin/Cantonese) with advice from practicing eligibility workers.
3. **Responsible party : HSA**
4. **Deliverables**
 - a. All retention packets sent to current enrolled families that have appropriately developed material sent to them.
 - b. All new "intake" applications will have appropriately developed material.
 - c. Reader friendly brochures in a number of languages designed and developed for distribution at community events.

Objective 2: Develop and maintain an ongoing public media educational campaign on the benefits of public health insurance and the need for children to obtain regular health care.

1. **Time Line** 07/01/01-06/30/02
2. **Major function;**
 - a. Design and develop a media campaign in collaboration with local community based organizations who are familiar with the target

- populations, (Hispanics, Filipinos, Chinese, Pacific Islanders, Russians) using local radio and television resources.
- b. Design and develop presentations to local community organizations on public health insurance and health care.
3. **Responsible party**
 - a. HSA
 - b. Community based organizations
 4. **Deliverables**
 - a. Public Service Announcements on English and foreign language radio and television stations advertising the availability of Medi-Cal and other health insurance.
 - b. Presentations given to community based organizations, churches and other faith-based organizations, social and ethnic clubs.
 - c. Establishment of health insurance information kiosks in various shopping centers (Serramonte, Hillsdale).

Objective 3: Develop an information network for the local business community to increase group health insurance enrollment efforts among small businesses and their employees.

1. **Time Line 07/01/01-06/30/02**
2. **Major function**
 - A. Establish strong collaborative effort with local business groups
 - B. Design and develop basic outreach material to distribute among local businesses
3. **Responsible party:** HSA
4. **Deliverables**
 - A. Developed outreach packets to be sent to local businesses and their employees
 - B. Presentations on public health insurance to various business groups; Kiwanis, Lions, etc;

Objective 4: Develop and maintain a central 1-800 telephone number providing information on health insurance.

1. **Time Line 07/01/01-06/30/02**
2. **Major function**
 - A. Central information source for both staff of HSA and Health Services Agencies
 - B. Central information source for public
3. **Responsible party :** HSA
4. **Deliverables**
 - a. Establishment of central number by 03/01/02
 - b. Advertisement of number in mass media in place by 04/01/02