

STANDARD AGREEMENT AMENDMENT

STD. 213 A (Rev 6/03)

 CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED _____ Pages

AGREEMENT NUMBER	AMENDMENT NUMBER
HI-0506-08	1
REGISTRATION NUMBER	

1. This Agreement is entered into between the State Agency and Contractor named below:
- STATE AGENCY'S NAME
California Department of Aging
- CONTRACTOR'S NAME
County of San Mateo
2. The term of this Agreement is July 1, 2005 through June 30, 2006
3. The maximum amount of this Agreement after this amendment is: \$254,916.00 Two hundred fifty-four thousand, nine hundred sixteen 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 Amendment increases the amount of funds available under this agreement. The Budget, Exhibit B Amendment 1, is attached and hereby incorporated by reference and supersedes all previous budgets.
- 2) The Budget Act of 2005 included an augmentation for additional counseling related to Medicare Part D changes. With these additional funds, the contractor shall provide HICAP counseling, informal advocacy, education on Medicare Beneficiaries as related to Medicare Part D changes.

3) Article I, A.3. is amended to read:

Management Capacity. The Program Manager shall manage the program at least 32 hours per week. The equivalent of at least one half-time paid Volunteer Coordinator shall assist the Program Manager in coordinating the activities of volunteers.

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.)		
County of San Mateo		
BY (Authorized Signature)	DATE SIGNED (Do not type)	
		
PRINTED NAME AND TITLE OF PERSON SIGNING		
Richard Gordon, President, Board of Supervisors		
ADDRESS		
225 37 th Avenue, Room 140, San Mateo, California 94403		
STATE OF CALIFORNIA		
AGENCY NAME		
California Department of Aging		
BY (Authorized Signature)	DATE SIGNED (Do not type)	
		
PRINTED NAME AND TITLE OF PERSON SIGNING		
Rachel de la Cruz, Manager, Contracts and Business Services Section		
ADDRESS		
1300 National Drive, Suite 200, Sacramento California 95834		
		<input type="checkbox"/> Exempt per: Mello-Granlund Older Californians Act

**HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM BUDGET DISPLAY
 FISCAL YEAR 2005/2006**

County of San Mateo

	PROGRAM BASELINE	ONE-TIME ONLY	TOTAL	NET CHANGE
FEDERAL FUND PROGRAMS:				
SHIP FUNDS:				
ADMIN	1,809	-	1,809	-
PROGRAM	18,091	-	18,091	-
TOTAL SHIP FUNDS	\$ 19,900	\$ -	19,900	\$ -
MEDICARE MODERNIZATION ACT (MMA)				
ADMIN	3,839	966	4,805	966
PROGRAM	38,391	9,666	48,057	9,666
TOTAL MMA	\$ 42,230	\$ 10,632	52,862	\$ 10,632
TOTAL FEDERAL HICAP FUNDS	\$ 62,130	\$ 10,632	72,762	\$ 10,632
STATE FUNDS:				
HICAP FUND				
ADMIN	3,086	-	3,086	-
PROGRAM	37,274	-	37,274	-
MMA STATE FUNDS	20,337	-	20,337	20,337
TOTAL HICAP FUNDS	\$ 60,697	\$ -	60,697	\$ 20,337
HICAP REIMBURSEMENTS (INS. FUND)				
ADMIN	6,180	-	6,180	-
PROGRAM	74,635	-	74,635	-
MMA STATE FUNDS	40,642	-	40,642	40,642
TOTAL HICAP REIMBURSEMENTS	\$ 121,457	\$ -	121,457	\$ 40,642
TOTAL STATE HICAP FUNDS	\$ 182,154	\$ -	182,154	\$ 60,979
TOTAL BUDGET	\$ 244,284	\$ 10,632	254,916	\$ 71,611