



Board Agenda Item 33

DATE: April 3, 2018

TO: Board of Supervisors

SUBMITTED BY: David Pomaville, Director, Department of Public Health

SUBJECT: Retroactive Revenue Agreement with California Department of Public Health

RECOMMENDED ACTION(S):

Approve and authorize the Chairman to execute a retroactive revenue Agreement with California Department of Public Health, including two required certifications, for the Black Infant Health program, effective July 1, 2017 through June 30, 2018 (\$769,843)

Approval of the recommended action will provide the Department of Public Health with an additional year of California Department of Public Health (CDPH) funding for the Black Infant Health (BIH) program. BIH uses State General Fund to draw down Federal Financial Participation (FFP) Federal Title XIX funds. The funding will support salary and benefits, operational, indirect, and subcontract costs to execute the required services. The program provides outreach, group interventions, case management, health education, and linkage to community resources to County pregnant and parenting African-American women and their families, with no increase in Net County Cost. This item is countywide.

ALTERNATIVE ACTION(S):

There is no viable alternative action. Should your Board not approve the recommended action, the Department would not be able to accept these program specific CDPH funds, resulting in a staff and program reduction.

RETROACTIVE AGREEMENT:

The recommended revenue agreement is retroactive to July 1, 2017. The agreement was received from CDPH on December 4, 2017. The time required to prepare, review, and confirm with CDPH the required documents related to the recommended agreement did not allow presentation to your Board at an earlier date.

FISCAL IMPACT:

There is no increase in Net County Cost associated with the recommended action. The non-competitive allocation (\$769,843) from CDPH to the County for the BIH program includes funding from:

- FFP (Federal Title XIX) (\$261,997),
- Federal Title V (\$259,379),
- State General Fund (\$248,467)

The recommended agreement allows indirect cost recovery of 25%; the Department's indirect cost rate is 26.5%; the 1.5% difference (\$8,239) will be covered with Health Realignment. Sufficient appropriations and

estimated revenues are included in the Department's Org 5620 FY 2017-18 Adopted Budget.

DISCUSSION:

CDPH funding has supported the Department's BIH program, which primarily provides outreach, group interventions, case management, health education, and linkage to community resources to County pregnant and parenting African-American women and their families. The recommended agreement will continue to provide funding for staff salary and benefits, operational expenses, subcontracts and indirect costs for the BIH program. The program focuses on reducing African-American infant mortality and improving maternal health through:

- prenatal and postpartum group interventions;
- complementary case management with in-depth health education and information;
- community outreach and education; and,
- referral and linkage to community services.

From July 1, 2016 to June 30, 2017, the BIH program:

- provided 11 community presentations to 213 attendees discussing the impact of African-American maternal and infant health disparities;
- received 241 referrals;
- enrolled 99 women; and,
- implemented 9 prenatal and 3 postpartum group series a total of 99 sessions.

Approval of the recommended agreement indicates the County's agreement to the terms of the CDPH MCAH Division, Fiscal Administration Policy & Procedures Manual, in which the County agrees to:

- indemnify the State in connection with the performance of the agreement and for any intellectual property claims arising from the agreement;
- seek dispute resolution if a dispute should arise; and
- allow the State to cancel the agreement without cause while the County may only cancel the agreement with cause.

REFERENCE MATERIAL:

BAI #35, January 10, 2017

ATTACHMENTS INCLUDED AND/OR ON FILE:

On file with Clerk - Agreement with CA Department of Public Health

CAO ANALYST:

Sonia M. De La Rosa