



Board Agenda Item 36

DATE: November 3, 2020

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, for the Maternal, Child and Adolescent Health and Black Infant Health programs, effective July 1, 2020 through June 30, 2021 (\$9,112,061).

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 Maternal, Child and Adolescent Health (MCAH) and Black Infant Health (BIH) programs. MCAH uses local funding (\$4,716,200) as a local match to draw down Federal Financial Participation (FFP) Title XIX funds. The funding will support salary and benefits, operational, indirect, and subcontract costs to execute the required services. The programs provide outreach, home visitation, health education and linkage to community resources to County pregnant and parenting women and their families, with no increase in Net County Cost. This item is countywide.

ALTERNATIVE ACTION(S):

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

RETROACTIVE AGREEMENT:

The recommended agreement is retroactive to July 1, 2020. It was received from CDPH on August 13, 2020 and the time required to prepare 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. CDPH approved a non-competitive allocation (\$4,395,861) to the County for the MCAH and BIH programs which include funding from:

- FFP (Federal Title XIX) (MCAH \$3,063,001 and BIH \$289,757)
- Federal Title V (MCAH \$210,795 and BIH \$259,379),
- State General Fund (BIH \$565,557),
- Sudden Infant Death Syndrome (MCAH \$7,372).

The local match (\$4,716,200) includes funding from:

- Children and Families Commission of Fresno County (\$1,499,816),

- Fresno County Superintendent of Schools (\$340,000),
- Department of Behavioral Health (\$276,949),
- University of California, San Francisco, Preterm Birth Initiative (\$100,000),
- Health Realignment (\$2,499,435).

This year's funding will include increases in both FFP (\$152,300) and State General Fund (\$317,090) dollars, which will allow the Department to provide more services. There will also be an increase in local match dollars from Children and Families Commission of Fresno County (\$940,837) and Fresno County Superintendent of Schools (\$40,000) for both existing agreements and a new agreement for Community Health Teams home visitation project. The Department's indirect cost rate of 22.674% (\$142,153) will be fully covered as CDPH's indirect cost rate limit is 25%. Sufficient appropriations and estimated revenues are included in the Department's Org 5620 FY 2020-21 Adopted Budget.

DISCUSSION:

For over three decades, CDPH funding has supported the Department's MCAH and BIH programs in providing outreach, home visitation, health education and linkage to community resources for pregnant and parenting women and their families. Some of these programs include Nurse-Family Partnership (NFP), Sudden-Infant Death Syndrome/Fetal-Infant Mortality Review (SIDS/FIMR), Child Care Health Linkages (CCHL), Nurse Liaison, High-Risk Infant Program (HRIP), Comprehensive Perinatal Services Program (CPSP) and Babies First. The recommended action will accept continued funding for staff salary and benefits, operational expenses, subcontracts, and indirect costs for the MCAH and BIH programs to continue their work towards:

- reducing infant mortality;
- reducing maternal morbidity and mortality;
- supporting the physical and cognitive development of children;
- promoting exclusive breastfeeding; and,
- optimizing the health and well-being of the client populations across their life span.

In FY 2019-20, these programs continued to provide a wide range of services to the community. The CPSP program enrolled 5 new perinatal providers, bringing the total to 46 active CPSP providers that received technical assistance on the various recommended services for pregnant women from conception through 60 days after giving birth. The SIDS/FIMR program disseminated guidelines on infant sleep and SIDS risk reduction to over 2,000 providers, parents, community members and other caregivers to provide recommendations on infant safe sleep practices. The case MCAH management/home visitation programs served a total of 417 children. The BIH program served 107 women, surpassing the target of 96, through 10 Pre and Postnatal groups series. The Nurse Liaison program kept the re-hospitalization rate of children who received Nurse Liaison services to under 4%. The NFP program helped 97.83% of its clients initiate breastfeeding at birth and ensured 93% of infants served were current on immunizations at 12 months of age.

The recommended agreement is based on the submitted Agreement Funding Application budget and scope of work (SOW), as reviewed and approved by CDPH. The BIH SOW for the recommended agreement is under the same terms and conditions as the FY 2019-20 SOW. 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.

REFERENCE MATERIAL:

BAI #35, November 5, 2019

ATTACHMENTS INCLUDED AND/OR ON FILE:

On file with Clerk - Agreement with CDPH 202010

CAO ANALYST:

Raul Guerra