AGENDA ITEM or FINAL CONTRACT REVIEW SUBMITTAL FORM

Agenda Item: Amendment No. 2 to Contract for Services; Hilltop

Action Requested: County Manager Signature

Parties to the Agreement: Gunnison County and Hilltop Health Services

Term Begins: 04/01/2015 **Term Ends:** 6/30/2015 **Grant Contract #:**

Summary:

Amendment to current contract with Hilltop for Health Coverage Guide services provided by DHHS staff.

Fiscal Impact: $3476

Submitted by: Karin Stewart **Submitter's Email Address:** kstewart@gunnisoncounty.org

Finance Review: (●) Required ( ) Not Required

Comments:
Add'l cost only through June, 2015

Reviewed by: GUNCOUNTY1\lNienhueser Discharge Date: 5/12/2015

County Attorney Review: (●) Required ( ) Not Required

Comments:
OK db 5/13/15

Reveiwed by: GUNCOUNTY1\dBaumgarten Discharge Date: 5/13/2015 Certificate of Insurance Required Yes ( ) No (●)

County Manager Review:

Comments:

Reveiwed by: GUNCOUNTY1\mbirnie Discharge Date: 5/13/2015

(●) Consent Agenda ( ) Regular Agenda ( ) Worksession Time Allotted:

Agenda Date: 5/19/2015

Revised April 2015

AMENDMENT NO. 2
TO
CONTRACT FOR SERVICES
(Gunnison County)

THIS AMENDMENT NO. 2 (this "Amendment") effective as April 1, 2015 (the "Amendment Effective Date") hereby amends that certain Contract for Services, effective September 1, 2013 (the "Contract") by and between the Board of County Commissioners of the County of Gunnison, Colorado, 200 East Virginia Avenue, Gunnison, CO 81230 ("Subcontractor") and Hilltop Health Services Corporation, a Colorado Corporation, dba Hilltop Community Resources, Inc., 540 S. 1ST Street, Montrose, CO 81401 ("Hilltop") (collectively the "Parties").

R E C I T A L S

Gunnison County through Gunnison County Health and Human Services ("Subcontractor") will work in collaboration with Kaye Hotsenpiller, an employee of Hilltop to provide certain Health Coverage Guide Services for the Connect for Health Assistance Network; and

Subcontractor and Hilltop now desire to amend certain terms and conditions of the Contract.

Therefore, in consideration of the mutual undertakings in this Amendment and for other good and valuable consideration, the receipt and sufficiency of which the Parties acknowledge Subcontractor and Hilltop agree as follows:

1. Defined Terms. The following terms in the Contract are defined as follows:

   "Contract" – will mean the written agreement between Subcontractor and Hilltop for Subcontractor to provide health coverage guide services.

   "Guide" – will mean health coverage guide, an employee of Subcontractor, to provide navigation assistance of Connect for Health Colorado marketplace insurance program to clients. Guide will be a 'satellite extension' of the Assistance Site.

   "Subcontractor" – will mean the County of Gunnison.

2. Term. The term of the Contract shall be extended for an additional 3 (3) months and unless otherwise amended, the term of the Contract will expire on June 30, 2015 (the "Contract Expiration Date").

3. Attachment C - Financial Terms and Reporting. The language to Attachment C of the Contract is deleted in its entirety and restated with the language stated in Attachment C - Financial Terms and Reporting attached hereto.

3. Severability. Except as otherwise expressly provided in this Amendment, all terms, conditions, requirements and specifications contained in the Contract shall remain in full force and effect.

4. Applicable Law. This Amendment is governed by and is to be construed in accordance with the laws of the State of Colorado.

5. Counterparts. This Amendment may be executed in counterparts, which when so executed shall be deemed to be an original and all of which when taken together shall constitute Amendment.

6. Entire Contract. This Amendment constitutes the understanding and agreement between Subcontractor and Hilltop with respect to the matters set forth herein.

IN WITNESS WHEREOF, Subcontractor and Hilltop have duly executed this Amendment as of the dates set forth below.

BOARD OF COUNTY COMMISSIONERS OF THE COUNTY OF GUNNISON, COLORADO

By:_____
Name: Matthew Birnie
Title: County Manager

Date: _____

HILLTOP HEALTH SERVICES CORPORATION, a COLORADO CORPORATION, dba HILLTOP COMMUNITY RESOURCES, INC.

By: _____
Name: J. Michael Stahl
Title: Chief Executive Officer

Date:_____

ATTEST:

By: _____
Deputy Clerk

ATTACHMENT C

Financial Terms & Reporting

Subcontractor agrees that the Guide will report actual time to reflect only work conducted under this Contract pertaining to non-Medicaid eligible populations.

1. Budget: The total amount allocated to Subcontractor under the Contract for three (3) months is Three Thousand Four Hundred and Seventy Six Dollars ($3,476) The budget is allocated as follows:

   a. Personnel: $2,811

      Twenty (20) hrs. per week for three (3) months at a labor rate of
      $18.16/hr. x 12 hrs/wk x 4.3 wks/mo x 3 months = $ 2,811

      *Note- only verifiable time spent on the project may be billed to the project. The budget represents maximum allowable expenditures per the contract period.

   b. Operating: $665

      Office Rent - ($109/mo. x 3 mo.) = $327
      Supplies - $100
      Internet & Phone = $95
      Internet ($17.50/mo. x 18 mos. = $51)
      Phone ($14/mo. x 3 mos. = $42)
      IT Support = $50

2. Reporting: Subcontractor agrees to maintain data and provide monthly, quarterly and annual reports to Hilltop for the data listed below:

   a. Personnel: Prepare a monthly report reflecting breakdown of employee time, attach copies of the employee's pay stubs and redact any personal confidential information (i.e., name, social security number, date of birth and address).
      Time spent will include the following information, either entered into Connect for Health Colorado's DART system or submitted in aggregate to jackies@htop.org by the 8th of the month for the preceding month:
      - Number of hours spent directly with customers
      - Number of customers served
      - Outcomes of customer appointments including:
        - Differentiation of customers by eligibility; Medicaid, CHP+, Connect for Health Colorado
        - Number of accounts opened
        - Number of customers enrolled
        - Number of covered lives
        - Number of education only
      - Number of administrative hours spent on the project
      - Number of training hours spent related to the project

    - Separate webinar trainings from all other trainings
- Number of hours spent on outreach, both preparation and activity

b. Rent: Retain copies of and have readily available site rental statements and proof of payments (cancelled checks or receipts) for each statement in the event of an audit.

c. Travel: Document travel as follows:

- Reason for travel.
- Beginning and ending addresses for travel.
- Actual miles traveled x $0.56 per mile (use website such as Map Quest to calculate mileage).

d. Utilities: Retain copies of utility statements and attach proof of payments (cancelled checks or receipts) for each statement in the event a future audit requires this information.

e. Outreach Activities:

- Number of people served at each community group or program activity 'outreach'.
- Amount of time spent at each outreach activity.
- Type of contact made (i.e., in person or phone).
- Number of meaningful contacts.
- Materials distributed.