



BOARD OF COUNTY COMMISSIONERS, BROWARD COUNTY, FLORIDA

AGREEMENT SUMMARY

EXHIBIT 1

NAME OF OTHER CONTRACTING PARTY

AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.

PROPOSED ACTION

☒ NEW ITEM ☐ AMENDMENT, NUMBER ☐ RENEWAL ☐ EXTENSION

DOCUMENT TYPE

Grant Agreement

Grant Agreement Veteran Directed Home and Community Based Services Program (VD-HCBS)

PURPOSE

To provide case management services to at-risk veterans referred to the Elderly and Veteran Services Division by the Aging and Disability Resource Center (ADRC), under the VD-HCBS program in order to prevent premature institutionalization of Broward County veterans.

SPECIAL PROVISIONS (select if applicable)

☐ LIVING WAGE PROGRAM☐ SBE SHELTERED MARKET PROGRAM☐ FEDERAL DBE PROGRAM☐ CDBE PROGRAM☐ M/WBE PROGRAM☐ REQUIRES IN-KIND MATCH: \$ OR %☐ REQUIRES CASH MATCH: \$ OR %

EFFECTIVE DATES (new agreements only)

START: 10/01/16

END: 9/30/2017

EFFECTIVE DATES (amendments only)

☐ NO CHANGE☐ END DATE HAS CHANGED FROM TO☐ TERM HAS FROM TO

CONTRACT ADMINISTRATOR

NAME: Andrea Busada

PHONE: 954-357-6622

CONTRACT TYPE

☒ COST REIMBURSEMENT ☐ OPEN-END☐ FIRM FIXED PRICE ☐ TIME AND MATERIALS☐ PERFORMANCE BASED ☐ OTHER

CONTRACT VALUE (new contracts)

☐ ACTUAL☒ ESTIMATED

Base amount

Reimbursables

Optional Services

Total contract value

\$100,800.00

CONTRACT VALUE (amendments only)

☐ NO CHANGE☐ ACTUAL☐ ESTIMATED

Original approved contract value

Approved previous adjustments

Value of this action

Amended total contract value

PAYMENT METHOD

☐ LUMP SUM PAYMENT☐ MILESTONE / PROGRESS BASED☒ SCHEDULED OR TIME-BASED☐ OTHER

PAYMENT TERMS

COUNTY BILLS AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC. MONTHLY FOR SERVICES PROVIDED.

COST ADJUSTMENT

☒ NOT APPLICABLE☐ FIXED PERCENTAGE %☐ ACTUAL COST☐ CPI OR OTHER INDEX☐ FIXED COST \$☐ OTHER

EQUITY PROGRAM PARTICIPATION SUMMARY

Total County established M/WBE, SBE, CDBE, or DBE participation goal for this action or project: N/A

Total contractor-committed M/WBE, SBE, CDBE, or DBE participation goal planned for this action or project: N/A

M/WBE, SBE, CDBE, or DBE participation to date: N/A

RENEWAL OR EXTENSION TERMS

NON RENEWABLE

TERMINATION AND CANCELLATION PROVISIONS

FOR CAUSE: THE COUNCIL BY WRITTEN NOTICE MAY TERMINATE AGREEMENT UPON NO LESS THAN TWENTY FOUR (24) HOURS NOTICE.

FOR CONVENIENCE: BY EITHER PARTY UPON NO LESS THAN FOURTEEN (14) CALENDAR DAYS NOTICE, WITHOUT CAUSE, UNLESS A LESSER TIME IS MUTUALLY AGREED UPON BY BOTH PARTIES IN WRITING.

DELIVERABLES, MILESTONES OR SCOPE OF THIS ACTION	<p>County is reimbursed for the provision of case management services to veterans under the VD-HCBS Program who are not eligible for Medicaid and are at high risk of nursing placement.</p>
LIST TERMS, CONSIDERATIONS OR DEVIATIONS FROM STANDARD COUNTY FORM.	<p>This Agreement is in the State of Florida standard contract format. Areawide Council on Aging, acting on behalf of the State of Florida, will sign last following County's signature.</p>