

Amendment 001

Contract JC116-15-2017

THIS AMENDMENT is entered into between the Areawide Council on Aging of Broward County, Inc., hereinafter referred to as the "Council," and Broward County, hereinafter referred to as the "Contractor," and collectively referred to as the "Parties," to amend Contract JC116-15-2017.

The purpose of this amendment is to increase the contract amount by \$16,666.57; increase the level of services; change the total contract funding from \$6,618,004.43 to \$6,634,671.00; amend language and replace attachments.

(1) Section 4 is hereby amended to read as follows:

4. Contract Amount:

The Council agrees to pay for contracted services according to the terms and conditions of this contract in an amount not to exceed \$5,971,204.00 or the rate schedule, subject to the availability of funds. The Contractor will contribute to the project \$663,467.00 in matching funds. Any costs or services paid for under any other contract or from any other source are not eligible for payment under this contract.

(2) Section 5.5. is hereby amended to read as follows:

5. The name, address, and telephone number of the Contract Manager for the Council for this contract is:

Marion Connor
Areawide Council on Aging of Broward County, Inc.
5300 Hiatus Road
Sunrise, FL 33351
(954) 745-9567

(2) Attachment II is hereby replaced with the revised Attachment II.

(3) Attachment IV, is hereby replaced with the revised Attachment IV.

This amendment will be effective on the last date that this amendment has been signed by both Parties.

All provisions in the contract and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform to this amendment.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the contract.

This amendment and all of its attachments are hereby made a part of the contract.

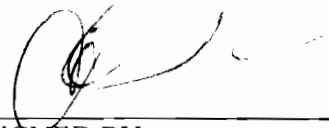
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IN WITNESS THEREOF, the Parties hereto have caused this 4 page amendment to be executed by their undersigned officials as duly authorized.

CONTRACTOR: Broward County

Areawide Council on Aging of Broward County, Inc.

BOARD PRESIDENT OR AUTHORIZED DESIGNEE



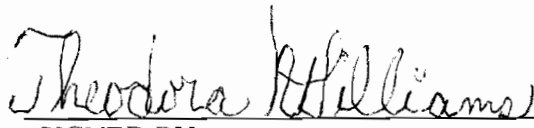
SIGNED BY: Alphonso Jefferson, Jr

For, Bertha Henry
NAME: Assistant County Administrator

County Administrator
TITLE:

6/30/17
DATE:

FEDERAL ID NUMBER: 59-6000531
FISCAL YEAR-END DATE: September 30



SIGNED BY: THEODORA WILLIAMS

NAME: PRESIDENT
TITLE:

06-30-2017
DATE:

Reviewed and approved as to form:
Joni Armstrong Coffey, County Attorney
By *K. Gordon 6/26/17*
Karen S. Gordon, Assistant County Attorney



ATTACHMENT II

1. FEDERAL RESOURCES AWARDED TO THE SUBRECIPIENT PURSUANT TO THIS AGREEMENT CONSISTS OF THE FOLLOWING:

Program Title	Year	Funding Source	CFDA/ CSFA #	Amount
TOTAL FUNDS CONTAINED IN THIS CONTRACT:				

COMPLIANCE REQUIREMENTS APPLICABLE TO THE FEDERAL RESOURCES AWARDED PURSUANT TO THIS AGREEMENT ARE AS FOLLOWS:

2. STATE RESOURCES AWARDED TO THE RECIPIENT PURSUANT TO THIS AGREEMENT CONSIST OF THE FOLLOWING:

MATCHING RESOURCES FOR FEDERAL PROGRAMS

PROGRAM TITLE	FUNDING SOURCE	CFDA	AMOUNT
TOTAL STATE AWARD			\$0

STATE FINANCIAL ASSISTANCE SUBJECT TO Sec. 215.97, F.S.

PROGRAM TITLE	FUNDING SOURCE	CSFA	AMOUNT
Community Care for the Elderly	General Revenue/ Tobacco Settlement Trust Fund	65010	\$5,971,204.00
TOTAL AWARD			\$5,971,204.00

COMPLIANCE REQUIREMENTS APPLICABLE TO STATE RESOURCES AWARDED PURSUANT TO THIS AGREEMENT ARE AS FOLLOWS:

STATE FINANCIAL ASSISTANCE

Section 215.97, F.S.

Chapter 69I-5, FL Admin Code

ATTACHMENT IV

COMMUNITY CARE FOR THE ELDERLY PROGRAM

BUDGET SUMMARY

<u>FIXED SERVICES</u>	<u>UNITS</u>	<u>UNIT RATE</u>	<u>CCE FUNDS</u>	<u>PROVIDER FUNDS</u>	<u>MAXIMUM REIMBURSEMENT</u>
ADULT DAY CARE	65,752	\$9.50	\$562,179.60	\$62,464.40	\$624,644.00
CASE AIDE	0	\$34.27	\$ -	\$ -	\$ -
CHORE	0	\$23.26	\$ -	\$ -	\$ -
CASE MANAGEMENT	17,329	\$60.54	\$944,187.89	\$104,909.77	\$1,049,097.66
EARS	42,123	\$0.80	\$30,328.56	\$3,369.84	\$33,698.40
HOMEMAKER	92,499	\$17.99	\$1,497,651.31	\$166,405.70	\$1,664,057.01
PERSONAL CARE	128,372	\$17.54	\$2,026,480.39	\$225,164.49	\$2,251,644.88
RESPIRE CARE	40,207	\$17.01	\$615,528.96	\$68,392.11	\$683,921.07
<u>COST REIMBURSEMENT CLIENT SERVICES</u>					
HOUSING IMPROVEMENT			\$ -	\$ -	\$ -
MATERIAL AID			\$ -	\$ -	\$ -
SPECIALIZED MEDICAL EQUIPMENT SERVICES & SUPPLIES			\$294,761.79	\$32,751.19	\$327,512.98
OTHER *			\$85.50	\$9.50	\$95.00
TOTAL CONTRACT AMOUNT			\$5,971,204.00	\$663,467.00	\$6,634,671.00

* This service requires pre-authorization from the Council's Contract Manager.