



COMMISSIONERS COURT CONTRACT FORM

CONTRACT SUMMARY

Approve and authorize the County Judge to sign a Vendor Agreement, a Request for Waiver form, Budget Worksheet Certification, In-Kind Match Certification and Budget Worksheet Calculation of Per Meal Unit Rate and Per Assessment Unit Rate for congregate and home delivered meals and participant assessment services with the Rio Grande Council of Governments/ Area Agency on Aging for a period beginning October 1, 2012 and ending September 30, 2013.

The County, through its City-County Nutrition Program, provides congregate and home delivered meals. The County receives reimbursement for these services from several funding sources. One important funding source is the Rio Grande Council of Governments /Area Agency on Aging (RGCOC/AAA). The AAA also reimburses the County for participant assessment services. The AAA uses a Vendor Agreement for each agency that delivers services. The Vendor Agreement sets the rate of reimbursement for services and provides the terms and conditions that govern the delivery of services. For the new fiscal year, the AAA will reimburse the County \$3.52 for each congregate meal, \$4.89 for each home delivered meal and \$31.91 for each participant assessment. The Vendor Agreement is accompanied by a Budget Worksheet Certification, In-Kind Match Certification and Budget Worksheet Calculation of Unit Rate for each service element. The attached budget worksheets display the program costs and how staff arrived at the unit rates for each service element. Approval of these documents enables the County to receive reimbursement for the delivery of each of these services in the next fiscal year.

BASIC CONTRACT DETAILS

CONTRACT NO.: 2012-0444

CONTRACT TITLE: Nutrition Program: Area Agency of Aging (AAA) of Rio Council of Governments [COG] Vendor Agreement and Budget Workbook [DADS-Congregate & Home Delivered Meal] FY13)

SECOND PARTY: Rio Grande Council of Governments, Area Agency on Aging

CONTRACT TYPE: Interlocal Agreement

TERM AND BUDGET DETAILS

TERM: 1 Year

EXTENSION OPTIONS (If Applicable):

EFFECTIVE DATE: October 01, 2012

EXPIRATION DATE (If Applicable): September 30, 2013

EXTENSION DEADLINE DATE (If Applicable):

AMOUNT:

APPROVALS

COUNTY ATTORNEY APPROVAL

The attached document has been given legal review by the El Paso County Attorney's Office on behalf of the County of El Paso, its officers, and employees. Said legal review should not be relied upon by any person or entity other than the County of El Paso, its officers, and employees.

COUNTY ATTORNEY: Janet Monteros

LEGAL REVIEW: Approved as to Form as Submitted

LEGAL REVIEW NOTES (If Applicable):

DATE: September 13, 2012

DIRECTOR/DEPARTMENT HEAD APPROVAL

The undersigned hereby certifies that he/she has read the contract, understands and approves the contract terms and conditions and further certifies that the contract conforms to the bid specifications, if any, and acknowledges that he/she is responsible for administering all terms and conditions.

DIRECTOR/DEPARTMENT HEAD/DESIGNEE: Rosemary Neill

DEPARTMENT CONTACT: Neill, Rosemary

DEPARTMENT: Family and Community Services

DATE: September 17, 2012



**AREA AGENCY ON AGING OF
The Rio Grande Council of Governments
VENDOR AGREEMENT**

County of El Paso, hereinafter referred to as Vendor, and Area Agency on Aging (AAA) of the Rio Grande Council of Governments, do hereby agree to provide services effective beginning October 1, 2012, in accordance with the Older Americans Act of 1965 (OAA), as amended, regulations of the Department of Aging and Disability Services (DADS), the AAA Direct Purchase of Services program and the stated Scope of Services.

The AAA Direct Purchase of Services program is designed to promote the development of a comprehensive and coordinated service delivery system to meet the needs of older individuals (60 years of age or older) and their caregivers. This agreement provides a mechanism for the creation of an individualized network of community resources accessible to a program participant in compliance with the OAA and DADS AAA Access and Assistance guidelines.

The purpose of the system of Access and Assistance is to develop cooperative working relationships with service providers to build an integrated service delivery system that ensures broad access to and information about community services, maximizes the use of existing resources, avoids duplication of effort, identifies gaps in services, and facilitates the ability of people who need services to easily find the most appropriate Vendor.

1. SCOPE OF SERVICES

- A. The Vendor agrees to provide the following service(s) as identified below to program participants authorized by the AAA staff, in accordance with the vendor application, all required assurances, licenses, certifications and rate setting documents, as applicable.

Service 1: Congregate Meals

Service Definition: A hot or other appropriate meal served to an eligible older individual which meets 33 1/3 percent of the dietary intakes established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences and complies with the most recent Dietary Guidelines for Americans, published by the Secretary of Agriculture, and which is served in a congregate setting. The objective is to reduce food insecurity and promote socialization of older adults.

Unit Definition: One Meal

Service Area: El Paso County

Service 2: Home Delivered Meals

Service Definition: A hot, cold, frozen, dried, canned, fresh or supplemental food (with satisfactory storage life) which provides a minimum of 33 1/3 percent of the dietary intakes established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences and complies with the most recent Dietary Guidelines for Americans, published by the Secretary of Agriculture, and is delivered to an eligible participant in their place of residence. The objective is to reduce food insecurity, and help the recipient sustain independent living in a safe and healthful environment.

Unit Definition: One Meal

Service Area: El Paso County

All Texas Administrative Code standards are located at the Texas Secretary of State website: www.sos.state.tx.us.

All Older Americans Act and other required rules and regulations are located at http://www.aoa.gov/AoARoot/About/Authorizing_Statutes/index.aspx.

Targeting: AAA services are designed to identify eligible program participants, with an emphasis on high-risk program participants and to serve older individuals with greatest economic and social need, low-income minorities and those residing in rural areas, as required by the OAA.

B. Services & Reimbursement Methodology:

Service	Fixed Rate (include rate)	Variable Rate (identify range)	Cost Reimbursement
Congregate Meals	\$3.52	N/A	Yes
Home Delivered Meals	\$4.89	N/A	Yes
Participant Assessment	\$31.91	N/A	Yes

2. TERMS OF AGREEMENT

A. The Vendor agrees to:

1. provide services in accordance with current or revised DADS policies and standards and the OAA.
2. submit billings with appropriate documentation as required by the AAA by the close of business on the 5 day of each month following the last day of the month in which services were provided.
 - a. If the 5 day falls on a weekend or holiday, the information shall be delivered by the close of business on the preceding business day.
 - b. The AAA cannot guarantee payment of a reimbursement request received for more than 45 calendar days of service delivery.
 - c. No reimbursement for services provided will be made if vendor payment invoices are not submitted to the AAA within 45 days of service delivery.
3. encourage program participant contributions (program income) on a voluntary and confidential basis. Such contributions will be properly safeguarded and accurately accounted for as receipts and expenditures on Vendor's financial reports if contributions are not required to be forwarded to the AAA. Client contributions (program income) will be reported fully, as required, to the AAA. Vendor agrees to expend all program income to expand or enhance the program/service under which it is earned.
4. notify the AAA Director within 30 days if, for any reason, the Vendor becomes unable to provide the service(s).
5. maintain communication and correspondence concerning program participants' status.
6. establish a method to guarantee the confidentiality of all information relating to the program participant in accordance with applicable federal and state laws, rules, and regulations. This provision shall not be construed as limiting AAA or any federal or state authorized representative's

right of access to program participant case records or other information relating to program participants served under this agreement.

7. keep financial and program supporting documents, statistical records, and any other records pertinent to the services for which a claim for reimbursement was submitted to the AAA. The records and documents will be kept for a minimum of five years after close of vendor's fiscal year.
8. make available at reasonable times and for required periods all fiscal and program participant records, books, and supporting documents pertaining to services provided under this agreement, for purposes of inspection, monitoring, auditing, or evaluations by AAA staff, the Comptroller General of the United States and the State of Texas, through any authorized representative(s).
9. if applicable, comply with the DADS process for Centers for Medicare and Medicaid Services (CMS) screening for excluded individuals and entities involved with the delivery of the Legal Assistance and Legal Awareness services.

B. The Vendor further agrees:

1. The agreement may be terminated for cause or without cause upon the giving of 30 days advance written notice.
2. The agreement does not guarantee a total level of reimbursement other than for individual units/services authorized; contingent upon receipt of funds.
3. Vendor is an independent provider, NOT an agent of the AAA. Thus, the Vendor indemnifies and holds harmless the AAA of the Rio Grande Council of Governments against expense or liability of any kind arising out of service delivery performed by the Vendor. Vendor must immediately notify the AAA if the Vendor becomes involved in or is threatened with litigation related to program participants receiving services funded by the AAA.
4. Employees of the Vendor will not solicit or accept gifts or favors of monetary value by or on behalf of program participants as a gift, reward or payment.

C. Through the Direct Purchase of Services program, the AAA of the Rio Grande Council of Governments agrees to:

1. review program participant intake and assessment forms completed by the Vendor, as applicable, to determine program participant eligibility. Service authorization is based on program participant need and the availability of funds.
2. provide timely written notification to Vendor of program participant's eligibility and authorization to receive services.
3. maintain communication and correspondence concerning the program participants' status.
4. provide timely technical assistance to Vendor as requested and as available.
5. conduct quality-assurance procedures, which may include on-site visits, to ensure quality services are being provided and if applicable, CMS exclusion reviews are conducted.
6. provide written policies, procedures, and standard documents concerning program participant authorization to release information (both a general and medical/health related release), client rights and responsibilities, contributions, and complaints/grievances and appeals to all program participants.
7. contingent upon the AAA's receipt of funds authorized for this purpose from DADS, reimburse the Vendor based on the agreed reimbursement methodology, approved rate(s), service(s) authorized, and in accordance with subsection (A)(2) of this document, within 45 days of the AAA's receipt of Vendor's invoice.

3. ASSURANCES

The Vendor shall comply with:

- A. Title VI of the Civil Rights Act of 1964 (42 U.S.C. §2000d *et seq.*)
- B. Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. §794)
- C. Americans with Disabilities Act of 1990 (42 U.S.C. §12101 *et seq.*)
- D. Age Discrimination in Employment Act of 1975 (42 U.S.C. §§6101-6107)
- E. Title IX of the Education Amendments of 1972 (20 U.S.C. §§1681-1688)
- F. Food Stamp Act of 1977 (7 U.S.C. §200 *et seq.*)
- G. Drug Free Workplace Act of 1988
- H. Texas Senate Bill 1 - 1991, as applicable
- I. DADS administrative rules, as set forth in the Texas Administrative Code, to the extent applicable to this Agreement
- J. Certification Regarding Debarment - 45CFR §92.35 Subawards to debarred and suspended parties; this document is required annually as long as this agreement is in effect
- K. Centers for Medicare and Medicaid Services (CMS) State Medicaid Director Letter SMDL #09-001 regarding Individuals or Entities Excluded from Participation in Federal Health Care Programs
- L. DADS Information Letter 11-07 – Obligation to Identify Individuals or Entities Excluded from Participation in Federal Health Care Programs

4. ATTACHMENT

List of Focal Points in the AAA planning and service area.

5. SIGNATURES

For the faithful performance of the terms of this agreement, the parties affix their signatures and bind themselves effective October 1, 2012.

Authorized Vendor Signature

Authorized Signature

Print Name

Rio Grande Council of Governments /Area
Agency on Aging
8037 Lockheed, Ste. 100
El Paso, TX 79925

Title

Date

Date

2012 - 0444

**Area Agency on Aging of the
Rio Grande Council of Governments
Focal Points**

The Area Agency on Aging of the Rio Grande Council of Governments has designated the following entities as Focal Points within the RGAAA Region (El Paso, Hudspeth, Culberson, Jeff Davis, Presidio and Brewster Counties):

Culberson County Nutrition Center – Culberson County – Van Horn, TX

El Paso City-County Nutrition Program – El Paso County – El Paso, TX (21 individual Senior Center sites)

- Canutillo
- Carolina
- Chihuahueta
- Clint
- Eastside
- Fabens
- Father Martinez
- Friendly
- Hilos de Plata
- McCall
- Memorial
- Montana Vista
- Northeast
- Sacramento
- San Elizario
- San Juan
- Seville
- Socorro
- Southside
- Wellington Chew
- Westside

Local AAA Office – El Paso County – El Paso, TX

Marfa Nutrition Center – Presidio County – Marfa, TX

Presidio Nutrition Center – Presidio County – Presidio, TX

Rural AAA Office – Presidio County – Marfa, TX

The Sunshine House – Brewster County – Alpine, TX

Department of Aging and Disability Services

Congregate Meals - Request for Waiver

Federal Contract Period: 10-01-12 / 09-30-13

Provider Must be a AAA Congregate Nutrition Provider

Nutrition Providers Legal Business Name:
Street Address:
Mailing Address:
City:
Zip Code:
Contact Name:

AAA Provider:
AAA Contact Name:

1 Does this Nutrition provider have an approved Congregate Nutrition Waiver for 2012?
Waiver to Serve Congregate Meals less than five (5) days per week
2 Number of meal sites included in this waiver:
3 Percentage of total meal sites included in this waiver: 0%
4 The circumstances necessitating this waiver request: (select "Yes" for all that apply)
5 If other, a reason for the request must be provided:
6 If the answer to question one is no, how will the consumers and the general public be notified of the change in the pattern of meal service:
7 If other is selected method used must be provided:
Assurances
By submitting this waiver request to the Texas Department of Aging and Disability Services (DADS, Access and Intake Division, requesting this waiver assures adherence to all AAA contract/vendor agreement requirements and applicable Texas Administrative Codes.
8 Provider Signature Date

2012-0444

Provider Total Budget by Service

Provider Name:		County of El Paso					AAA Name: Agency on Aging of the Rio Grande Area						
9/14/2012 9:36 AM		Region Number: Region 1/10											
Cost Area	Total Agency Budget	Home Delivered Meal Program	Nutrition Education - AAA Clients	Nutrition Education RLS Clients	Congregate Meal Program	Other Meal Programs (non-DADS)	Agency Budget not Applicable to Programs	Participant Assessment	Transportation	If applicable replace with title of other agency program	If applicable replace with title of other agency program	If applicable replace with title of other agency program	Balance not budgeted
Personnel													
Salaries (Identified by Job Title)													
Director	104,683.80	19,261.82				1,674.94	83,747.04						-
Assistant Manager	47,436.87	26,185.11			18,974.79	2,276.97							-
Program Accountant	54,424.35	47,566.88			2,721.22	4,136.25							-
Administrative Assistant	35,610.93	27,847.75			5,341.64	2,421.54							-
Clerk I	32,762.75	18,085.04				1,572.61		13,105.10					-
Clerk II	17,780.10	8,178.85				711.20		8,890.05					-
Center Coordinator I	28,896.52				28,896.52								-
Center Coordinator II	33,728.38				33,728.38								-
Center Coordinator III	28,636.51				28,636.51								-
Center Coordinator IV	17,746.60				17,746.60								-
Data Specialist	23,396.25				23,396.25								-
Total Salaries	425,103.06	147,125.45	-	-	159,441.91	12,793.51	83,747.04	21,995.15	-	-	-	-	-
Payroll Taxes & Benefits (Employer Paid)													
Federal Insurance compensation Act (FICA)	32,520.38	11,255.10			12,197.31	978.70	6,406.64	1,682.63					-
Texas Unemployment Compensation Act (TUCA)	1,615.39	559.07			605.88	48.62	318.24	83.58					-
Federal Unemployment Tax Act (FUTA)													-
Workers Compensation	1,997.98	691.49			749.38	60.13	393.61	103.37					-
Health Insurance	29,585.14	9,158.89			17,268.43	796.42	2,027.12	334.28					-
Retirement	56,414.23	20,371.27			22,082.70	1,771.41	11,598.97	589.88					-
Dental	2,639.78	766.11			1,574.94	66.62	200.91	31.20					-
Life	49.48	14.34			30.23	1.25	3.66						-
Total Payroll Taxes & Benefits (Employer Paid)	124,822.38	42,816.27	-	-	54,508.87	3,723.15	20,949.15	2,824.94	-	-	-	-	-
Contract staff (Identify by Position)													
Total Contract staff	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Personnel	549,925.44	189,941.72	-	-	213,950.78	16,516.66	104,696.19	24,820.09	-	-	-	-	-
Professional Development													
Conference (list Conference & Attendees)													
Total Conferences	-	-	-	-	-	-	-	-	-	-	-	-	-
Dues (list Organization Name)													
Total Dues	-	-	-	-	-	-	-	-	-	-	-	-	-
Materials (list Items)													
Total Materials	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Professional Development	-	-	-	-	-	-	-	-	-	-	-	-	-

2012-0444

Provider Total Budget by Service

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Meals/Food													
Raw Food													-
Total Raw Food	-	-	-	-	-	-	-	-	-	-	-	-	-
Purchased Meals													
Hot Prepared Meals Purchased from a Supplier or Central Kitchen	1,231,239.72	542,853.24			641,375.16	47,011.32							-
Frozen Meals	175,247.28	151,831.68				23,415.60							-
Chilled Meals	884,806.32	814,289.34				70,516.98							-
Shelf Stable Meals													-
Total Purchased Meals	2,291,293.32	1,508,974.26	-	-	641,375.16	140,943.90	-	-	-	-	-	-	-
Freight													-
Total Freight	-	-	-	-	-	-	-	-	-	-	-	-	-
Storage Cost (Food or Supply)													-
Total Storage Cost	-	-	-	-	-	-	-	-	-	-	-	-	-
Consumables (Identify by type)													-
Non-Capital Equipment (less that \$5,000 per item)													-
Paper/plastic goods (napkins, plates, utensils, etc)													-
Meal Delivery Consumable Supplies													-
Pots/Pans/Cooking Utensils													-
Total Consumables	-	-	-	-	-	-	-	-	-	-	-	-	-
Other (Identify Individually all items over \$100.)													-
Total Other	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Meals/Food	2,291,293.32	1,508,974.26	-	-	641,375.16	140,943.90	-	-	-	-	-	-	-

2012-0444

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Equipment													
Depreciation (Identify item, year purchased, cost)													
Total Depreciation	-	-	-	-	-	-	-	-	-	-	-	-	-
Interest (Identify Item, year purchased, cost)													
Total Interest	-	-	-	-	-	-	-	-	-	-	-	-	-
Leasing (Identify Item, year leased)													
Total Leasing	-	-	-	-	-	-	-	-	-	-	-	-	-
Maintenance (Identify Item, year purchased, cost)													
Total Maintenance	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Equipment													
Occupancy/Building													
Rent													
Total Rent	-	-	-	-	-	-	-	-	-	-	-	-	-
Utilities													
Gas, electricity, & water for Carolina Center	8,000.00				8,000.00								
Total Utilities	8,000.00	-	-	-	8,000.00	-	-	-	-	-	-	-	-
Depreciation (Identify item, year purchased, cost)													
Total Depreciation	-	-	-	-	-	-	-	-	-	-	-	-	-
Mortgage Interest													
Total Mortgage Interest	-	-	-	-	-	-	-	-	-	-	-	-	-
Insurance (Identify type of insurance)													
Total Insurance	-	-	-	-	-	-	-	-	-	-	-	-	-
Security													
Total Security	-	-	-	-	-	-	-	-	-	-	-	-	-
Janitorial													
Total Security	-	-	-	-	-	-	-	-	-	-	-	-	-
Repair (Identify all items over \$100.)													
Total Repair	-	-	-	-	-	-	-	-	-	-	-	-	-
Taxes (Identify Type of Tax)													
Total Taxes	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Occupancy/Building	8,000.00	-	-	-	8,000.00	-	-	-	-	-	-	-	-

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Transportation/Travel													
Mileage Reimbursement													-
Total Mileage Reimbursement	-	-	-	-	-	-	-	-	-	-	-	-	-
Delivery													-
Total Delivery	-	-	-	-	-	-	-	-	-	-	-	-	-
Gas & Oil													-
Total Gas & Oil	-	-	-	-	-	-	-	-	-	-	-	-	-
Repairs (Identify Item & year purchased)													-
Total Repair	-	-	-	-	-	-	-	-	-	-	-	-	-
Insurance (Identify type of insurance)													-
Total Insurance	-	-	-	-	-	-	-	-	-	-	-	-	-
Depreciation/Lease (Identify item, year purchased, cost)													-
Total Depreciation	-	-	-	-	-	-	-	-	-	-	-	-	-
Interest													-
Total Interest	-	-	-	-	-	-	-	-	-	-	-	-	-
Tags & Licenses													-
Total Tags & Licenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Transportation/Travel	-	-	-	-	-	-	-	-	-	-	-	-	-

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Administrative & General													
Advertising													
Total Advertising	-	-	-	-	-	-	-	-	-	-	-	-	-
Printing													
Total Printing	-	-	-	-	-	-	-	-	-	-	-	-	-
Copying	500.00	230.00			250.00	20.00							
Total Copying	500.00	230.00	-	-	250.00	20.00	-	-	-	-	-	-	-
Office Supplies	1,700.00	874.00			750.00	76.00							
Total Office supplies	1,700.00	874.00	-	-	750.00	76.00	-	-	-	-	-	-	-
Contractual Agreements													
Pest Control	2,230.00				2,230.00								
Total Contractual Agreements	2,230.00	-	-	-	2,230.00	-	-	-	-	-	-	-	-
Postage													
Total Postage	-	-	-	-	-	-	-	-	-	-	-	-	-
Telecommunications													
Telephone	4,900.00	3,624.80			960.00	315.20							
Total Telecommunication	4,900.00	3,624.80	-	-	960.00	315.20	-	-	-	-	-	-	-
Liability Insurance													
Total Liability Insurance	-	-	-	-	-	-	-	-	-	-	-	-	-
Legal Fees													
Total Legal Fees	-	-	-	-	-	-	-	-	-	-	-	-	-
Accounting Fees													
Total Accounting Fees	-	-	-	-	-	-	-	-	-	-	-	-	-
Consulting Fees													
Total Consulting Fees	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Fees (Explain)													
Courier delivery	900.00				900.00								
Total Other Fees	900.00	-	-	-	900.00	-	-	-	-	-	-	-	-
Audit													
Total Audit	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Misc. (Explain)													
Fire extinguisher inspections	300.00				300.00								
Dumpster containers fee	4,200.00				4,200.00								
Total other Misc.	4,500.00	-	-	-	4,500.00	-	-	-	-	-	-	-	-
Total Administrative & General	14,730.00	4,728.80	-	-	9,590.00	411.20	-	-	-	-	-	-	-

2012-0444

Provider Total Budget by Service

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Total													
Total of all Cost Areas	2,863,948.76	1,703,644.78	-	-	872,915.94	157,871.76	104,696.19	24,820.09	-	-	-	-	
Percentage of Total Cost	100.000%	59.486%	0.000%	0.000%	30.479%	5.512%	3.656%	0.867%	0.000%	0.000%	0.000%	0.000%	
Budgeted Meals													
Provider Prepared Meals													
Hot Meals	351,882	114,526			227,438	9,918							
Frozen Meals	36,972	32,032				4,940							
Chilled Meals	186,668	171,791				14,877							
Shelf Stable Meals													
Total Provider Prepared Meals	575,522	318,349			227,438	29,735							
Purchased Meals													
Hot Prepared Meals Purchased from a Supplier or Central Kitchen	-												
Frozen Meals	-												
Chilled Meals	-												
Shelf Stable Meals	-												
Total Purchased Meals	-	-			-	-							
Total Budgeted Meals	575,522	318,349			227,438	29,735							
% of Total Meals		55%			40%	5%							
Whole Unit Rate		5.35			3.84	\$ 5.31							
AAA Contractors/Vendors may choose to provide required Nutrition Education as a separate service and exclude costs related to Nutrition Education from the meal rate. If the cost of Nutrition Education is to be provided as a separate service, enter an N to exclude Nutrition Education costs from the meal rate.													
												N	

2012-0444

9/14/12 9:36 AM

Provider Name: County of El Paso

AAA Name: Agency on Aging of the Rio Grande Area

Congregate Meals

BUDGET WORKSHEET CERTIFICATION

AS SIGNER OF THIS BUDGET WORKSHEET, I HEREBY CERTIFY THAT:

- **I have read the note below and the instructions applicable to this budget worksheet.**
- **I have reviewed this budget worksheet after its preparation.**
- **To the best of my knowledge and belief, this budget worksheet is true, correct and complete, and was prepared in accordance with the instructions applicable to this budget worksheet.**
- **This budget worksheet was prepared from the books and records of the contracted provider.**
- **I acknowledge that all books and records related to this rate setting process are subject to audit in accordance with contract requirements and all applicable federal and state laws.**

Note: The person legally responsible for the conduct of the contracted provider must sign this Budget Worksheet Certification. If a sole proprietor, the owner must sign the Budget Worksheet Certification. If a partnership, a partner must sign the Budget Worksheet Certification. If a corporation, the person authorized by the Board of Directors Resolution must sign the Budget Worksheet Certification. Misrepresentation of information contained in the budget worksheet may result in adverse action, up to and including contract termination. Furthermore, falsification of information in the budget worksheet may result in a referral for prosecution.

County of El Paso

Name of Contracted Provider

Veronica Escobar

Printed/Typed Name of Signer

Date

Signature

Signer Authority:
(check one)

- Sole Proprietor
- Partner
- Corporate Officer

- Association Officer
- Board Member
- Governmental Official

2012-0444

AAA Name: Agency on Aging of the Rio Grande Area

Congregate Meals IN-KIND MATCH CERTIFICATION

Provider: County of El Paso

In-kind Contribution(s): \$0

For any item identified below, you must maintain support documentation.

ITEM	DATE OF RECEIPT	VALUE
TOTAL		\$0

Note: All contributions must meet the requirements of IRS Publication 561
<http://www.irs.gov/pub/irs-pdf/p561.pdf>

Examples of Documentation Include:

- Rent:
1. Letter of Agreement with Owner
 2. Adequate Valuation of Property on a Current Basis (this should be reviewed at least every two years and if senior center, based on property value and center participation)
- Labor:
1. Minimum wage
 2. Documented prevailing wage in the Area. For prevailing wage information visit the Texas Workforce Commission's website at <http://www.tracer2.com/>.

All in-kind labor must be required for the service to be provided. If you would not hire someone to perform the labor if it were not in-kind then you cannot count it.

- Utilities:
1. Copy of Bill
 2. Agreement of Amount Paid if Partial

County of El Paso
Name of Contracted Provider

Veronica Escobar
Printed/Typed Name of Signer

Date

Signature

2012-0444

Congregate Meals
BUDGET WORKSHEET CALCULATION OF THE PER MEAL UNIT RATE

1. Total Budgeted Expenses for Contract Year		1. <u>\$ 872,915.94</u>												
2. Total Number of Anticipated Meals to be Provided by Funding Source														
	<table border="0"> <tr> <td>DADS A&I AAA</td> <td><u>189,795</u></td> <td>Other Funds Eligible Meals</td> <td><u>3,884</u></td> <td>Other Sources 5</td> <td><u>0</u></td> </tr> <tr> <td>Program Income</td> <td><u>33,759</u></td> <td>Other Funds - Non-Eligible Meals</td> <td><u>0</u></td> <td>Other Sources 6</td> <td><u>0</u></td> </tr> </table>	DADS A&I AAA	<u>189,795</u>	Other Funds Eligible Meals	<u>3,884</u>	Other Sources 5	<u>0</u>	Program Income	<u>33,759</u>	Other Funds - Non-Eligible Meals	<u>0</u>	Other Sources 6	<u>0</u>	2. <u>227,438</u>
DADS A&I AAA	<u>189,795</u>	Other Funds Eligible Meals	<u>3,884</u>	Other Sources 5	<u>0</u>									
Program Income	<u>33,759</u>	Other Funds - Non-Eligible Meals	<u>0</u>	Other Sources 6	<u>0</u>									
3. Whole Unit Rate (Line 1 divided by Line 2)		3. <u>\$ 3.84</u>												

Reimbursement Calculation

4. Projected NSIP per Meal Value		<u>DADS A&I AAA</u>	<u>0.69</u>
5. Rate Less NSIP per Meal Value		<u>\$ 3.15</u>	
6. Mandatory Local Match of 10%	<u>\$ 0.32</u>		
** If Applicable, Match Reduction From the In-kind Match Certification form	<u>\$ -</u>		
Required Cash Match	<u>\$ 0.32</u>		
7. Proposed Meal Rate (Line 3 minus Line 6)		<u>\$ 3.52</u>	

** If any portion of the required match is in-kind, you must complete an In-Kind Match Certification form.

By signing below, the provider acknowledges that all related records are subject to audit in accordance with contract requirements and all applicable federal and state laws.

County of El Paso
 Legal Name of Contracted Provider

Veronica Escobar
 Printed/Typed Name of Signer

 Signature

 Date

Agency on Aging of the Rio Grande Area
 Name of Area Agency on Aging

Yvette M. Lugo
 Printed/Typed Name of Signer

 Signature

 Date

2012-0444

Congregate Meal Budget Worksheet

Provider Name: County of El Paso
 AAA Name: Agency on Aging of the Rio Grande Area

Review of Most Recent Completed Year Approved Budget to Actual Year End Expense and Current Proposed Budget

9/14/12 9:36 AM

Most Recent Completed Budget Year 2011

Proposed Budget

Explanation of Variances

Cost Area	Expense per General Ledger	Approved Budget	Variance Budget minus Expenses	Percentage of Variance	Percentage of Unit Cost
Personnel					
Salaries, PR Taxes & Benefits	222,658.68	242,733.55	20,075	-8.27%	
Contract staff, Compensation			0	0.00%	
Total	222,658.68	242,733.55	20,075	-8.27%	25.48%
Nutrition Education					
Salaries, PR Taxes & Benefits			0	0.00%	
Contract staff, Compensation			0	0.00%	
Materials			0	0.00%	
Conference			0	0.00%	
Total	-	0.00	0	0.00%	0.00%
Professional Development					
Conference			0	0.00%	
Dues			0	0.00%	
Materials			0	0.00%	
Total	-	0.00	0	0.00%	0.00%
Meals/Food					
Raw Food			0	0.00%	
Purchased Meals	634,826.10	677,457.89	42,632	-6.29%	
Freight			0	0.00%	
Storage			0	0.00%	
Consumables			0	0.00%	
Other			0	0.00%	
Total	634,826.10	677,457.89	42,632	-6.29%	72.64%
Equipment					
Depreciation			0	0.00%	
Interest			0	0.00%	
Leasing			0	0.00%	
Maintenance			0	0.00%	
Total	-	0.00	0	0.00%	0.00%
Occupancy/Building					
Rent			0	0.00%	
Utilities	7,303.96	8,500.00	1,196	-14.07%	
Depreciation			0	0.00%	
Mortgage Interest			0	0.00%	
Insurance			0	0.00%	
Security			0	0.00%	
Janitorial		2,550.00	2,550	100.00%	
Repair		1,000.00	1,000	100.00%	
Taxes			0	0.00%	

Proposed Budget	Percentage Variance - Prior Year Actual to Proposed Budget	Percentage of Unit Cost
213,950.78	-3.91%	
-	0.00%	
213,950.78	-3.91%	24.51%
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	0.00%
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	0.00%
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
641,375.16	1.03%	73.48%
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	0.00%
-	0.00%	
8,000.00	9.53%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	

Inflation Factor 2011 to 2012 | 1.021%

Inflation Factor 2012 to 2013 | 1.014%

Combined Inflation Factor | 2.035%

1. An explanation of variance must be provided for each cost area where the expenses per General Ledger varies from the approved budget for the most recent completed year by 10% or more.

2. An explanation of variance must be provided for each cost area where the proposed budget amount exceeds the prior year actual amount by more than the two year combined inflation factor.

2. The cost of gas, electricity and water for one congregare meal site has increased due to a rate increase by the City of El Paso.

2012-0444

Congregate Meal Budget Worksheet

Provider Name: County of El Paso
 AAA Name: Agency on Aging of the Rio Grande Area

Review of Most Recent Completed Year Approved Budget to Actual Year End Expense and Current Proposed Budget

9/14/12 9:36 AM

Most Recent Completed Budget Year 2011

Cost Area	Expense per General Ledger	Approved Budget	Variance Budget minus Expenses	Percentage of Variance	Percentage of Unit Cost
Total	7,303.96	12,050.00	4,746	-39.39%	0.84%

Transportation/Travel					
Mileage Reimbursement			0	0.00%	
Delivery			0	0.00%	
Gas & Oil			0	0.00%	
Repairs			0	0.00%	
Insurance			0	0.00%	
Depreciation/Lease			0	0.00%	
Interest			0	0.00%	
Tags & Licenses			0	0.00%	
Total	-	0.00	0	0.00%	0.00%

Administrative & General					
Advertising			0	0.00%	
Printing			0	0.00%	
Copying	258.16	214.00	-44	20.64%	
Office Supplies	770.64	1,120.00	349	-31.19%	
Contractual Agreements			0	0.00%	
Postage			0	0.00%	
Telecommunications	960.00	2,402.80	1,443	-60.05%	
Liability Insurance			0	0.00%	
Legal Fees			0	0.00%	
Accounting Fees			0	0.00%	
Consulting Fees			0	0.00%	
Other Fees (Explain)	781.40	850.00	69	-8.07%	
Audit			0	0.00%	
Other Misc. (Explain)	6,362.89	4,000.00	-2,363	59.07%	
Total	9,133.09	8,586.80	-546	6.36%	1.05%

Total					
Total of all Cost Areas	873,921.83	940,828.24	66,906.41	-7.11%	100.00%
Total Number of Meals	222,746	249,198			
Whole Cost per Meal	3.92	3.78			
Approved Meal Rate Title III	3.47	3.47			

Proposed Budget

Proposed Budget	Percentage Variance - Prior Year Actual to Proposed Budget	Percentage of Unit Cost
8,000.00	9.53%	0.92%

-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	0.00%

-	0.00%	
-	0.00%	
250.00	-3.16%	
750.00	-2.68%	
2,230.00	100.00%	
-	0.00%	
960.00	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
900.00	15.18%	
-	0.00%	
4,500.00	-29.28%	
9,590.00	5.00%	1.10%

872,915.94	-0.12%	100.00%
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Explanation of Variances

Inflation Factor 2011 to 2012	1.021%
Inflation Factor 2012 to 2013	1.014%
Combined Inflation Factor	2.035%

1. An explanation of variance must be provided for each cost area where the expenses per General Ledger varies from the approved budget for the most recent completed year by 10% or more.
 2. An explanation of variance must be provided for each cost area where the proposed budget amount exceeds the prior year actual amount by more than the two year combined inflation factor.

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2. Pest control expense was re-categorized from Janitorial to Contractual agreement.

-	0.00%	
-	0.00%	
250.00	-3.16%	
750.00	-2.68%	
2,230.00	100.00%	
-	0.00%	
960.00	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
-	0.00%	
900.00	15.18%	
-	0.00%	
4,500.00	-29.28%	
9,590.00	5.00%	1.10%

872,915.94	-0.12%	100.00%
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2012-0444

Congregate Meal Budget Worksheet

Provider Name: County of El Paso
 AAA Name: Agency on Aging of the Rio Grande Area

Review of Most Recent Completed Year Approved Budget to Actual Year End Expense and Current Proposed Budget

9/14/12 9:36 AM

Most Recent Completed Budget Year 2011

Cost Area	Expense per General Ledger	Approved Budget	Variance Budget minus Expenses	Percentage of Variance	Percentage of Unit Cost

Proposed Budget		
Proposed Budget	Percentage Variance - Prior Year Actual to Proposed Budget	Percentage of Unit Cost

Explanation of Variances

Inflation Factor 2011 to 2012	1.021%
Inflation Factor 2012 to 2013	1.014%
Combined Inflation Factor	2.035%

1. An explanation of variance must be provided for each cost area where the expenses per General Ledger varies from the approved budget for the most recent completed year by 10% or more.
 2. An explanation of variance must be provided for each cost area where the proposed budget amount exceeds the prior year actual amount by more than the two year combined inflation factor.

Funding Source	Proposed Meals
DADS A&I AAA - Match Required	189795
Program Income	33759
Other Funds - Eligible Meals	3884
Other Funds - Non-Eligible Meals	
Local Funds - Required Match	NA
Other Sources 5	
Other Sources 6	
Total Meals by Funding Source	227438
Provider Total Budgeted Congregate Meals	227438
Variance (Provider Total Budgeted Congregate Meals - Total Meals by Funding Source)	0

Calculated Rate	Revenue	
3.52	668078.40	Proposed Meals * Calculated Units
3.84	129634.56	Proposed Meals * Calculated Units
3.84	14914.56	Proposed Meals * Calculated Units
0.00	0.00	Proposed Meals * Calculated Units
0.32	60734.40	Proposed Meals * Calculated Units
3.84	0.00	Proposed Meals * Calculated Units
3.84	0.00	Proposed Meals * Calculated Units
	873361.92	Total Revenue

Estimated Number of Nutrition Education Units AAA Clients	
Nutrition Education Budget - AAA Clients	0
Calculated Cost per Unit	-

2012-0944

9/14/12 9:36 AM
 Provider Name: County of El Paso
 AAA Name: Agency on Aging of the Rio Grande Area
 Region Number: Region 1/10

**Home Delivered Meals
 BUDGET WORKSHEET CALCULATION OF THE PER MEAL UNIT RATE**

1. Total Budgeted Expenses for Contract Year	1. <u>\$ 1,703,644.78</u>		
2. Total Number of Anticipated Meals to be Provided by Funding Source			
DADS A&I AAA <u>78,300</u>	Title XX <u>226,738</u>	Title XIX <u>0</u>	
Program Income <u>0</u>	Other Funds Eligible Meals <u>13,311</u>	Other Funds - Non-Eligible Meals <u>0</u>	2. <u>318,349</u>
3. Whole Unit Rate (Line 1 divided by Line 2)			3. <u>\$ 5.35</u>

Reimbursement Calculation

	DADS A&I AAA & Title XX	Title XIX
4. Projected NSIP per Meal Value	<u>0.69</u>	N/A
5. Rate Less NSIP per Meal Value	<u>\$ 4.66</u>	N/A
6. Mandatory Local Match of 10% ** If Applicable, Match Reduction From the In-kind Match Certification form	<u>\$ 0.47</u> <u>\$ (0.01)</u>	
Required Cash Match	<u>\$ 0.46</u>	N/A
7. Proposed Meal Rate (Line 3 minus Line 6)	<u>\$ 4.89</u>	<u>\$ 5.35</u>
8. Rate Cap Applicable to Title XIX, Title XX and DADS A&I AAA Common Providers	<u>\$ 4.95</u>	<u>\$ 6.12</u>
9. Excess of Cap Rate Reduction	<u>\$ -</u>	<u>\$ -</u>
Accepted Unit Rate for Current Year	<u>\$ 4.89</u>	<u>\$ 5.35</u>

** If any portion of the required match is in-kind, you must complete an In-Kind Match Certification form.

By signing below, the provider acknowledges that all related records are subject to audit in accordance with contract requirements and all applicable federal and state laws.

County of El Paso
 Legal Name of Contracted Provider

Veronica Escobar
 Printed/Typed Name of Signer

 Signature

 Date

Agency on Aging of the Rio Grande Area
 Name of Area Agency on Aging

Region 1/10
 Department of Aging and Disability Services

Yvette M. Lugo
 Printed/Typed Name of Signer

Olga Q. Contreras
 Printed/Typed Name of Signer

 Signature

 Signature

 Date

 Date



2012 - 0444

9/14/12 9:36 AM

Provider Name: County of El Paso

AAA Name: Agency on Aging of the Rio Grande Area

Region Number: Region 1/10

Home Delivered Meals BUDGET WORKSHEET CERTIFICATION

AS SIGNER OF THIS BUDGET WORKSHEET, I HEREBY CERTIFY THAT:

- I have read the note below and the instructions applicable to this budget worksheet.
- I have reviewed this budget worksheet after its preparation.
- To the best of my knowledge and belief, this budget worksheet is true, correct and complete, and was prepared in accordance with the instructions applicable to this budget worksheet.
- This budget worksheet was prepared from the books and records of the contracted provider.
- I acknowledge that all books and records related to this rate setting process are subject to audit in accordance with contract requirements and all applicable federal and state laws.

Note: The person legally responsible for the conduct of the contracted provider must sign this Budget Worksheet Certification. If a sole proprietor, the owner must sign the Budget Worksheet Certification. If a partnership, a partner must sign the Budget Worksheet Certification. If a corporation, the person authorized by the Board of Directors Resolution must sign the Budget Worksheet Certification. Misrepresentation of information contained in the budget worksheet may result in adverse action, up to and including contract termination. Furthermore, falsification of information in the budget worksheet may result in a referral for prosecution.

County of El Paso

Name of Contracted Provider

Veronica Escobar

Printed/Typed Name of Signer

Date

Signature

Signer Authority:

(check one)

Sole Proprietor

Partner

Corporate Officer

Association Officer

Board Member

Governmental Official

✓

2012 - 0444

9/14/12 9:36 AM

AAA Name: Agency on Aging of the Rio Grande Area
Region Number: Region 1/10

**Home Delivered Meals
IN-KIND MATCH CERTIFICATION**

Provider: County of El Paso

In-kind Contribution(s): \$2,935

For any item identified below, you must maintain support documentation.

ITEM	DATE OF RECEIPT	VALUE
Utilities bills at 800 E. Overland, #208; El Paso, Texas	6/1/2012	\$2,935
TOTAL		\$2,935

Note: All contributions must meet the requirements of IRS Publication 561
<http://www.irs.gov/pub/irs-pdf/p561.pdf>

Examples of Documentation Include:

- Rent:
1. Letter of Agreement with Owner
 2. Adequate Valuation of Property on a Current Basis (this should be reviewed at least every two years and if senior center, based on property value and center participation)
- Labor:
1. Minimum wage
 2. Documented prevailing wage in the Area. For prevailing wage information visit the Texas Workforce Commission's website at <http://www.tracer2.com/>.

All in-kind labor must be required for the service to be provided. If you would not hire someone to perform the labor if it were not in-kind then you cannot count it.

- Utilities:
1. Copy of Bill
 2. Agreement of Amount Paid if Partial

County of El Paso
Name of Contracted Provider

Veronica Escobar
Printed/Typed Name of Signer

Date

Signature

2012-0444

Home Delivered Meal Budget Worksheet

Provider Name: County of El Paso
 AAA Name: Agency on Aging of the Rio Grande Area
 Region Number: Region 1/10

9/14/12 9:36 AM

Review of Most Recent Completed Year Approved Budget to Actual Year End Expense and Current Proposed Budget

Most Recent Completed Budget Year **2011**

Cost Area	Expense per General Ledger	Approved Budget	Variance Budget minus Expenses	Percentage of Variance	Percentage of Unit Cost
-----------	----------------------------	-----------------	--------------------------------	------------------------	-------------------------

Funding Source	Proposed Meals
DADS A&I AAA	78,300
DADS - Title XX	226,738
DADS - Title XIX (CBA)	
Program Income	
Other Funds - Eligible Meals	13,311
Other Funds - Non-Eligible Meals	
Local Funds - Required Match	NA
Local Funds - Cap Limit Exceeded DADS A&I-AAA & Title XX	NA
Local Funds - Cap Limit Exceeded Title XIX	NA
Total Meals by Funding Source	318,349
Provider Total Budgeted Home Delivered Meals	318,349
Variance (Provider Total Budgeted Home Delivered Meals - Total Meals by Funding Source)	-

Estimated Number of Nutrition Education Units AAA Clients	
Nutrition Education Budget - AAA Clients	
Calculated Cost per Unit	

Proposed Budget

Proposed Budget	Percentage Variance - Prior Year Actual to Proposed Budget	Percentage of Unit Cost
-----------------	------------------------------------------------------------	-------------------------

Explanation of Variances

Inflation Factor 2011 to 2012	1.021%
Inflation Factor 2012 to 2013	1.014%
Combined Inflation Factor	2.035%

1. An explanation of variance must be provided for each cost area where the expenses per General Ledger varies from the approved budget for the most recent completed year by 10% or more.
 2. An explanation of variance must be provided for each cost area where the proposed budget amount exceeds the prior year actual amount by more than the two year combined inflation factor.

Calculated Rate	Revenue	
4.89	382,887	Proposed Meals * Calculated Units
4.89	1,108,749	Proposed Meals * Calculated Units
0.00	-	Proposed Meals * Calculated Units
5.35	-	Proposed Meals * Calculated Units
5.35	71,214	Proposed Meals * Calculated Units
5.35	-	Proposed Meals * Calculated Units
0.48	140,433	DADS A&I AAA Proposed Meals + Title XX Proposed Meals * Calculated Rate
0.00	-	DADS A&I AAA Proposed Meals + Title XX Proposed Meals * Calculated Rate
0.00	-	DADS Title XIX Proposed Meals * Calculated Rate
	1,703,283	

2012-0444

**Participant Assessment
 BUDGET WORKSHEET CALCULATION OF THE UNIT RATE**

1. Total Budgeted Expenses for Contract Year 1. \$ 24,820.09

2. Total Number of Anticipated Units to be Provided

DADS A&I AAA - 10 %		Program		Other Sources 6		
Match Required	700	Income	0		0	
DADS A&I AAA - 25 %		Local Funds		Other Sources 7		
Match Required	0		0		0	
DADS A&I AAA - Full Unit		Other Funds		Other Sources 8		
Rate	0		0		0	2. <u>700</u>

3. Cost per unit (Line 1 divided by Line 2) - Full Unit Rate 3. \$ 35.46

Reimbursement Calculation for Contracts Requiring Unit Rate Match Reduction

4. Mandatory Local Match of 10%	\$ 3.55	
** If Applicable, Match Reduction From the In-kind Match Certification form Required Match	\$ -	
5. Full Unit Rate Less Required Match (Line 3 minus Line 4)		4. \$ 3.55 5. \$ 31.91

4. Mandatory Local Match of 25%	\$ 8.87	
** If Applicable, Match Reduction From the In-kind Match Certification form Required Match	\$ -	
5. Full Unit Rate Less Required Match (Line 3 minus Line 4)		4. \$ 8.87 5. \$ 26.59

**If any portion of the required match is in-kind, you must complete an In-Kind Match Certification form.

Contract Reimbursed at Full Cost Per Unit Rate. Match Requirements Will Be Met Through Provision of Additional Units		
\$ <u>35.46</u>	Contractor Initial _____	AAA Initial _____

County of El Paso
 Legal Name of Contracted Provider

 Signature

Veronica Escobar
 Printed/Typed Name of Signer

 Date

Agency on Aging of the Rio Grande Area
 Name of Area Agency on Aging

 Signature

Yvette M. Lugo
 Printed/Typed Name of Signer

 Date



2012-0444

Participant Assessment
BUDGET WORKSHEET CERTIFICATION

AS SIGNER OF THIS BUDGET WORKSHEET, I HEREBY CERTIFY THAT:

- I have read the note below and the instructions applicable to this budget worksheet.
- I have reviewed this budget worksheet after its preparation.
- To the best of my knowledge and belief, this budget worksheet is true, correct and complete, and was prepared in accordance with the instructions applicable to this budget worksheet.
- This budget worksheet was prepared from the books and records of the contracted provider.
- I acknowledge that all books and records related to this rate setting process are subject to audit in accordance with contract requirements and all applicable federal and state laws.

Note: The person legally responsible for the conduct of the contracted provider must sign this Budget Worksheet Certification. If a sole proprietor, the owner must sign the Budget Worksheet Certification. If a partnership, a partner must sign the Budget Worksheet Certification. If a corporation, the person authorized by the Board of Directors Resolution must sign the Budget Worksheet Certification. Misrepresentation of information contained in the budget worksheet may result in adverse action, up to and including contract termination. Furthermore, falsification of information in the budget worksheet may result in a referral for prosecution.

County of El Paso
Name of Contracted Provider

Veronica Escobar
Printed/Typed Name of Signer

Date

Signature

- Signer Authority:
(check one)
- | | | | |
|--------------------------|-------------------|-------------------------------------|-----------------------|
| <input type="checkbox"/> | Sole Proprietor | <input type="checkbox"/> | Association Officer |
| <input type="checkbox"/> | Partner | <input type="checkbox"/> | Board Member |
| <input type="checkbox"/> | Corporate Officer | <input checked="" type="checkbox"/> | Governmental Official |

2012-0444

Provider Name: County of El Paso
 AAA Name: Agency on Aging of the Rio Grande Area

9/14/12 9:36 AM

Most Recent Completed Budget Year

2011

Cost Area	Expense per General Ledger	Approved Budget	Variance Budget minus Expenses	Percentage of Variance	Percentage of Unit Cost
Personnel					
Salaries, PR Taxes & Benefits	25,547.37	11,607.87	-13,940	120.09%	
Contract staff, Compensation			0	0.00%	
Total	25,547.37	11,607.87	-13,940	120.09%	100%
Nutrition Education					
Salaries, PR Taxes & Benefits			0	0.00%	
Contract staff, Compensation			0	0.00%	
Materials			0	0.00%	
Conference			0	0.00%	
Total	-	0.00	0	0.00%	0%
Professional Development					
Conference			0	0.00%	
Dues			0	0.00%	
Materials			0	0.00%	
Total	-	0.00	0	0.00%	0%
Meals/Food					
Raw Food			0	0.00%	
Purchased Meals			0	0.00%	
Freight			0	0.00%	
Storage			0	0.00%	
Consumables			0	0.00%	
Other			0	0.00%	
Total	-	0.00	0	0.00%	0%
Equipment					
Depreciation			0	0.00%	
Interest			0	0.00%	
Leasing			0	0.00%	
Maintenance			0	0.00%	
Total	-	0.00	0	0.00%	0%

Participant Assessment

Review of Most Recent Completed Year Approved Budget to Actual Year End Expense and Current Proposed Budget

Proposed Budget	Percentage Variance - Prior Year Actual to Proposed Budget	Percentage of Unit Cost
24820.09	-2.85%	
0.00	0.00%	
24820.09	-2.85%	100%
0.00	0.00%	
0.00	0.00%	0%
0.00	0.00%	
0.00	0.00%	0%
0.00	0.00%	
0.00	0.00%	0%
0.00	0.00%	
0.00	0.00%	0%
0.00	0.00%	
0.00	0.00%	0%
0.00	0.00%	
0.00	0.00%	0%
0.00	0.00%	
0.00	0.00%	0%

Explanation of Variances

Inflation Factor 2011 to 2012	1.021%
Inflation Factor 2012 to 2013	1.014%
Combined Inflation Factor	2.035%

1. An explanation of variance must be provided for each cost area where the expenses per General Ledger varies from the approved budget for the most recent completed year by 10% or more.
2. An explanation of variance must be provided for each cost area where the proposed budget amount exceeds the prior year actual amount by more than the two year combined inflation factor.

2012-0444

Provider Name: County of El Paso
 AAA Name: Agency on Aging of the Rio Grande Area

9/14/12 9:36 AM

Most Recent Completed Budget Year

2011

Cost Area	Expense per General Ledger	Approved Budget	Variance Budget minus Expenses	Percentage of Variance	Percentage of Unit Cost
Occupancy/Building					
Rent			0	0.00%	
Utilities			0	0.00%	
Depreciation			0	0.00%	
Mortgage Interest			0	0.00%	
Insurance			0	0.00%	
Security			0	0.00%	
Janitorial			0	0.00%	
Repair			0	0.00%	
Taxes			0	0.00%	
Total	-	0.00	0	0.00%	0%
Transportation/Travel					
Mileage Reimbursement			0	0.00%	
Delivery			0	0.00%	
Gas & Oil			0	0.00%	
Repairs			0	0.00%	
Insurance			0	0.00%	
Depreciation/Lease			0	0.00%	
Interest			0	0.00%	
Tags & Licenses			0	0.00%	
Total	-	0.00	0	0.00%	0%
Administrative & General					
Advertising			0	0.00%	
Printing			0	0.00%	
Copying			0	0.00%	
Office Supplies			0	0.00%	
Contractual Agreements			0	0.00%	
Postage			0	0.00%	
Telecommunications			0	0.00%	
Liability Insurance			0	0.00%	
Legal Fees			0	0.00%	
Accounting Fees			0	0.00%	
Consulting Fees			0	0.00%	
Other Fees (Explain)			0	0.00%	
Audit			0	0.00%	
Other Misc. (Explain)			0	0.00%	
Total	-	0.00	0	0.00%	0%

Participant Assessment

Review of Most Recent Completed Year Approved Budget to Actual Year End Expense and Current Proposed Budget

Proposed Budget		
Proposed Budget	Percentage Variance - Prior Year Actual to Proposed Budget	Percentage of Unit Cost
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	0%
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	0%

Explanation of Variances	
Inflation Factor 2011 to 2012	1.021%
Inflation Factor 2012 to 2013	1.014%
Combined Inflation Factor	2.035%
1. An explanation of variance must be provided for each cost area where the expenses per General Ledger varies from the approved budget for the most recent completed year by 10% or more. 2. An explanation of variance must be provided for each cost area where the proposed budget amount exceeds the prior year actual amount by more than the two year combined inflation factor.	
-	
-	
-	

2012-0444

Participant Assessment

Provider Name: County of El Paso
 AAA Name: Agency on Aging of the Rio Grande Area

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Most Recent Completed Budget Year

2011

Cost Area	Expense per General Ledger	Approved Budget	Variance Budget minus Expenses	Percentage of Variance	Percentage of Unit Cost
Total					
Total of all Cost Areas	25,547.37	11,607.87	(13,939.50)	120.09%	1.00
Total Number Units	718	429	(289.00)	-40.25%	
Whole Cost per Unit	35.58	27.06	48.23	-23.95%	
Approved Unit Rate		24.35			

Review of Most Recent Completed Year Approved Budget to Actual Year End Expense and Current Proposed Budget

Proposed Budget		
Proposed Budget	Percentage Variance - Prior Year Actual to Proposed Budget	Percentage of Unit Cost
24,820.09	-2.85%	100%
Budgeted Units		Budgeted Cost per Unit
700.00		35.46

Explanation of Variances	
Inflation Factor 2011 to 2012	1.021%
Inflation Factor 2012 to 2013	1.014%
Combined Inflation Factor	2.035%
1. An explanation of variance must be provided for each cost area where the expenses per General Ledger varies from the approved budget for the most recent completed year by 10% or more. 2. An explanation of variance must be provided for each cost area where the proposed budget amount exceeds the prior year actual amount by more than the two year combined inflation factor.	

Funding Source	Proposed Units
DADS A&I AAA - 10 % Match Required	700
DADS A&I AAA - 25 % Match Required	
DADS A&I AAA - Full Unit Rate	
Program Income	
Local Funds	
Other Funds	
Local Funds - Required Match 10%	NA
Local Funds - Required Match 25%	NA
Other Sources 6	
Other Sources 7	
Other Sources 8	
Total Units by Funding Source	700

Calculated Rate	Revenue
31.91	22,337.00
-	-
-	-
-	-
-	-
-	-
3.55	2,485.00
8.87	-
-	-
-	-
-	-
	24,822.00

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**Transportation
 BUDGET WORKSHEET CALCULATION OF THE UNIT RATE**

1. Total Budgeted Expenses for Contract Year	1.	\$ -
2. Total Number of Anticipated Units to be Provided		
DADS A&I AAA - 10 % Match Required	0	Program Income
DADS A&I AAA - 25 % Match Required	0	Local Funds - Eligible Trips
DADS A&I AAA - Full Unit Rate	0	Non-Eligible Trips
		Other Sources 6
		Other Sources 7
		Other Sources 8
	2.	-
3. Cost per unit (Line 1 divided by Line 2) - Full Unit Rate	3.	\$ -

Reimbursement Calculation for Contracts Requiring Unit Rate Match Reduction

4. Mandatory Local Match of 10%	\$ -	
** If Applicable, Match Reduction From the In-kind Match Certification form Required Match	\$ -	
5. Full Unit Rate Less Required Match (Line 3 minus Line 4)		4. \$ -
		5. \$ -

4. Mandatory Local Match of 25%	\$ -	
** If Applicable, Match Reduction From the In-kind Match Certification form Required Match	\$ -	
5. Full Unit Rate Less Required Match (Line 3 minus Line 4)		4. \$ -
		5. \$ -

**If any portion of the required match is in-kind, you must complete an In-Kind Match Certification form.

Contract Reimbursed at Full Cost Per Unit Rate. Match Requirements Will Be Met Through Provision of Additional Units		
\$ -	Contractor Initial	AAA Initial

 County of El Paso
 Legal Name of Contracted Provider

 Signature

 Printed/Typed Name of Signer

 Date

 Agency on Aging of the Rio Grande Area
 Name of Area Agency on Aging

 Signature

 Printed/Typed Name of Signer

 Date

Transportation
BUDGET WORKSHEET CERTIFICATION

AS SIGNER OF THIS BUDGET WORKSHEET, I HEREBY CERTIFY THAT:

- I have read the note below and the instructions applicable to this budget worksheet.
- I have reviewed this budget worksheet after its preparation.
- To the best of my knowledge and belief, this budget worksheet is true, correct and complete, and was prepared in accordance with the instructions applicable to this budget worksheet.
- This budget worksheet was prepared from the books and records of the contracted provider.
- I acknowledge that all books and records related to this rate setting process are subject to audit in accordance with contract requirements and all applicable federal and state laws.

Note: The person legally responsible for the conduct of the contracted provider must sign this Budget Worksheet Certification. If a sole proprietor, the owner must sign the Budget Worksheet Certification. If a partnership, a partner must sign the Budget Worksheet Certification. If a corporation, the person authorized by the Board of Directors Resolution must sign the Budget Worksheet Certification. Misrepresentation of information contained in the budget worksheet may result in adverse action, up to and including contract termination. Furthermore, falsification of information in the budget worksheet may result in a referral for prosecution.

County of El Paso

Name of Contracted Provider

Printed/Typed Name of Signer

Date

Signature

Signer Authority:
(check one)

Sole Proprietor
Partner
Corporate Officer

Association Officer
Board Member
Governmental Official

2012-0444

Transportation

Provider Name: County of El Paso
 AAA Name: Agency on Aging of the Rio Grande Area

9/14/12 9:36 AM

Most Recent Completed Budget Year 2011					
Cost Area	Expense per General Ledger	Approved Budget	Variance Budget minus Expenses	Percentage of Variance	Percentage of Unit Cost
Personnel					
Salaries, PR Taxes & Benefits			-	0.00%	
Contract staff, Compensation			-	0.00%	
Total	-	0.00	-	0.00%	0%
Nutrition Education					
Salaries, PR Taxes & Benefits			-	0.00%	
Contract staff, Compensation			-	0.00%	
Materials			-	0.00%	
Conference			-	0.00%	
Total	-	0.00	-	0.00%	0%
Professional Development					
Conference			-	0.00%	
Dues			-	0.00%	
Materials			-	0.00%	
Total	-	0.00	-	0.00%	0%
Meals/Food					
Raw Food			-	0.00%	
Purchased Meals			-	0.00%	
Freight			-	0.00%	
Storage			-	0.00%	
Consumables			-	0.00%	
Other			-	0.00%	
Total	-	0.00	-	0.00%	0%
Equipment					
Depreciation			-	0.00%	
Interest			-	0.00%	
Leasing			-	0.00%	
Maintenance			-	0.00%	
Total	-	0.00	-	0.00%	0%
Occupancy/Building					
Rent			-	0.00%	
Utilities			-	0.00%	
Depreciation			-	0.00%	
Mortgage Interest			-	0.00%	
Insurance			-	0.00%	
Security			-	0.00%	
Janitorial			-	0.00%	
Repair			-	0.00%	
Taxes			-	0.00%	
Total	-	0.00	-	0.00%	0%
Transportation/Travel					
Mileage Reimbursement			-	0.00%	
Delivery			-	0.00%	
Gas & Oil			-	0.00%	

Review of Most Recent Completed Year Approved Budget to Actual Year End Expense and Current Proposed Budget

Proposed Budget		
Proposed Budget	Percentage Variance - Prior Year Actual to Proposed Budget	Percentage of Unit Cost
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	0%
0.00		
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	0%
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	0%
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	0%
0.00	0.00%	
0.00	0.00%	
0.00	0.00%	

Explanation of Variances	
	Inflation Factor 2011 to 2012 1.021%
	Inflation Factor 2012 to 2013 1.014%
	Combined Inflation Factor 2.035%
1. An explanation of variance must be provided for each cost area where the expenses per General Ledger varies from the approved budget for the most recent completed year by 10% or more. 2. An explanation of variance must be provided for each cost area where the proposed budget amount exceeds the prior year actual amount by more than the two year combined inflation factor.	
2. Provider re-evaluated job duties to determine a more accurate proposed apportionment for salaries and benefits.	
2. Provider's subcontractor will not charge transportation costs. Subcontractor's rate is a flat fee of \$4.74 per meal.	

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