Recommendation for Council Action

Austin City Council  
Item ID  51664  
Agenda Number  17.

Meeting Date:  11/12/2015  
Department:  Health and Human Services

Subject

Approve negotiation and execution of Amendment No. 2 to a contract with FOUNDATION COMMUNITIES Inc., for insurance enrollment educational outreach and navigation services of the Affordable Care Act Health Insurance Marketplace, to increase funding in an amount not to exceed $100,000, for a total contract amount not to exceed $600,000.

Amount and Source of Funding

Funding in the amount of $100,000 is available in the Fiscal Year 2015-2016 Operating Budget of the Health and Human Services Department.

Fiscal Note

A fiscal note is not required.

Purchasing Language:

Prior Council Action:

On September 17, 2015, Council approved Amendment # 1 adding funds and time to the initial agreement. On September 8, 2015, Council approved Ordinance No. 20150908-001 adopting the Fiscal Year 2015-2016 Operating Budget. On November 6, 2014, Council approved the initial 12-month agreement beginning on October 1, 2014.

For More Information:

Stephanie Hayden, Deputy Director, 972-5017; Robert Kingham, Social Services Policy Manager, 972-5026; Elena Shemilina, Agenda Coordinator, 972-5033.

Council Committee, Boards and Commission Action:

MBE / WBE:

Related Items:

Additional Backup Information

More than 6.3 million Texans, including 1.2 million children, lack health insurance. Uninsured rates in Texas are 1.5 to 2 times the national average, which creates significant problems in the financing and delivery of health care to all Texans. Racial and ethnic minorities are significantly less likely to have health insurance. In Texas, 39% of Hispanics/Latinos, 22% of African Americans, and 20% of other races are uninsured. In Travis County, it is estimated that over 200,000 individuals do not have health insurance.

The Patient Protection and Affordable Care Act of 2010 (ACA) was signed into law on March 23, 2010 to reform health care in America. The ACA includes reforms to the affordability, quality, and availability of health insurance, along with new cost cutting measures, rules, and regulations for both public and private health insurance companies, and the health care industry. The ACA aims to increase the number of Americans with access to affordable health insurance. This is done, in part, by providing tax credits to individuals and opening up competitive, regulated, online health insurance exchanges, also known as health insurance marketplaces, which enable individuals to buy insurance and receive cost-assistance. The Open Enrollment Period for coverage starting in 2016 is November 1, 2015 through January 31, 2016.

Foundation Communities Inc. provides affordable homes and free onsite support services for thousands of working
families with children, as well as veterans, seniors, and individuals with disabilities. They offer a model that empowers both residents and non-residents to achieve educational success, financial stability, and healthier lifestyles. In October of 2013, Foundation Communities Inc. created Insure Central Texas, a program that assists the uninsured and underinsured seeking to obtain coverage through the ACA. Insure Central Texas is free and open to the community with two locations in the Austin area. During the initial contract period, Foundation Communities Inc. served 10,678 households and assisted the enrollment of 5,911 individuals in qualified health plans. As a result, enrollees subsidized the cost of health insurance by obtaining a total of $14 million in Federal Premium Tax Credits. This additional funding will allow Foundation Communities Inc. to continue to maintain services for individuals eligible for insurance provided through the ACA.

Approval of the additional funding for this agreement is time sensitive due to the open enrollment period for the ACA Health Insurance Marketplace beginning on November 1, 2015.

Related Departmental Goal: Provision of Social Services – Promote a healthy community by addressing the needs of vulnerable households.