



**SAN FRANCISCO
HUMAN SERVICES AGENCY**

MEMORANDUM

TO: DISABILITY AND AGING SERVICES COMMISSION

THROUGH: KELLY DEARMAN, EXECUTIVE DIRECTOR

FROM: MEGAN ELLIOTT, ACTING DEPUTY DIRECTOR OF PROGRAMS
ESPERANZA ZAPIEN, DIRECTOR OF CONTRACTS

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DATE: WEDNESDAY, SEPTEMBER 3, 2025

SUBJECT: NEW CONTRACT: **INSTITUTE ON AGING** (NON-PROFIT) FOR PROVISION OF ELDER & DEPENDENT ADULT ABUSE PREVENTION

	<u>Full Term</u>	<u>Contingency</u>	<u>Total</u>		
CONTRACT TERM:	9/1/25 - 6/30/29				
CONTRACT AMOUNT:	\$2,012,500	\$201,250	\$2,213,750		
ANNUAL AMOUNT:	<u>FY 25-26</u>	<u>FY 26-27</u>	<u>FY 27-28</u>	<u>FY 28-29</u>	
	\$437,500	\$525,000	\$525,000	\$525,000	
FUNDING SOURCE:	<u>County</u>	<u>State</u>	<u>Federal</u>	<u>Contingency</u>	<u>Total</u>
	\$2,012,500			\$201,250	\$2,213,750
PERCENTAGE:	100%				100%

The Department of Disability and Aging Services (DAS) requests authorization to enter into a new contract agreement with **INSTITUTE ON AGING** for the period of September 1, 2025, to June 30, 2029, in the amount of \$2,012,500 plus a 10% contingency for a total amount not to exceed \$2,213,750. The purpose of this contract is to facilitate required Multidisciplinary team meetings for APS and provide education on abuse, neglect, self-neglect and exploitation to mandated reporters.



Background

The California Elder Abuse and Dependent Adult Civil Protection Act (EADACPA) mandates that adult protective services (APS) agencies receive referrals from mandated reporters or any source with reasonable cause to believe an elder or dependent adult's welfare is at risk. Due to the complexity of abuse reports, APS agencies are required to form multidisciplinary teams for effective intervention. Additionally, APS agencies must provide information, instructional materials, and mandated reporter training on abuse and neglect to humane societies, animal control, fire departments, environmental health and building code offices, and mandated reporters of financial abuse.

The City and County of San Francisco APS agency has consistently complied with these mandates through the granting process.

Services to be Provided

- **Facilitate and run San Francisco APS's High-Risk Self Neglect (HRSN) MDT meetings**
 - The HRSN MDT is focused on situations wherein the primary challenge is a matter of self-neglect of physical care, residence, and/or financial self-neglect. APS social workers and community partners will present challenging cases that require collaboration between multiple programs or agencies to address the protection issues of the client. Meetings will act as a forum for deliberation and planning interventions for the cases to improve outcomes for the client. Quarterly, the APS program will open the MDT meeting to community partners to present non-APS clients for the greater benefit to the community supporting older adults.
- **Facilitate and run San Francisco APS's Adult Maltreatment MDT meetings**
 - The Adult Maltreatment MDT focuses on cases of alleged abuse, neglect, or exploitation of the client. APS social workers and community partners will present challenging cases that require collaboration between multiple programs or agencies to address the protection issues of the client. Meetings will act as a forum for deliberation and planning interventions for the cases to improve outcomes for the client. Quarterly, the APS program will open the MDT meeting to community partners to present non-APS clients for the greater benefit to the community supporting older adults.
- **Facilitate and run San Francisco APS's Elder and Dependent Adult Death Review Team (EDDRT)**

- The Elder & Dependent Adult Death Review Team meetings discuss deceased adults 65+ or adults with a disability who were considered dependent adults between the ages of 18 to 64 that possibly died due to confirmed or suspected abuse, neglect, self-neglect, or exploitation.
- **Provide training to mandated reporters covered by the California Elder Abuse and Dependent Adult Civil Protection Act (EADACPA)**, including law enforcement, service providers, nurses, social workers, financial services employees, as well as other mandated reporters of suspected abuse, neglect, self-neglect, or exploitation. The training focuses on identification, prevention, and reporting to APS.
- **Twice annually, facilitate and report on Feedback/Evaluation Meetings** covering the High Risk Self Neglect MDT, Adult Maltreatment MDT, and EDDRT meeting)
- **Collect and report evaluation surveys for the MDT meetings** (High Risk Self Neglect, Adult Maltreatment, and EDDRT), and the Mandated Reporter trainings
- **Annually, present to San Francisco APS** staff on the status of each of the above activities, changes, and share insights to inform and engage the APS team with the evolution of the program.

Selection

The contractor was selected through RFP # 1167 issued on April 7, 2025.

Funding

Funding for this contract is provided through County General Funds.

ATTACHMENTS

Appendix A, Scope of Services

Appendix B, Budget

**Appendix A – Services to be Provided
 Institute on Aging
 Elder & Dependent Adult Abuse Prevention (EDAAP)
 September 1, 2025 – June 30, 2029**

I. Purpose

The purpose of this grant is to improve the protection of older adults and dependent adults who are at risk of experiencing abuse, neglect, exploitation, or self-neglect by facilitating multidisciplinary team meetings and provide training to mandated reporters on abuse, neglect, self-neglect, and exploitation.

II. Definitions

Term	Definition
Adult Maltreatment MDT	APS social workers and community partners that meet the criteria of multidisciplinary team member as defined in the California Elder Abuse and Dependent Adult Civil Protection Act (EADACPA) to present on and discuss challenging cases that require collaboration between multiple programs or agencies to address the protection issues of the client.
Adult with disability	Person 18 years of age or older living with a disability.
BFS	Department of Benefits and Family Support
CARBON	Contracts Administration, Reporting and Billing On Line System
DAS	Department of Disability and Aging Services
Dependent Adult	An Adult with a Disability who is 18-59 years, who cannot care for themselves and depend on others for protection or to meet their most basic needs.
Disability	A condition attributable to mental or physical impairment, or a combination of mental and physical impairments including hearing and visual impairments, that results in substantial functional limitations in one (1) or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment.
EDAAP	Elder & Dependent Adult Abuse Prevention

Term	Definition
EDDRT	Elder and Dependent Adult Death Review Team
Elder (an Older Adult)	An older adult who is 60 years or older.
Frail	An older individual that is determined to be functionally impaired because the individual either: (a) Is unable to perform at least two activities of daily living, including bathing, toileting, dressing, feeding, breathing, transferring and mobility and associated tasks, without substantial human assistance, including verbal reminding, physical cueing or supervision. (b) Due to a cognitive or other mental impairment, requires substantial supervision because the older individual behaves in a manner that poses a serious health or safety hazard to the individual or others.
HRSN	High-Risk Self Neglect
Low Income	Having income at or below 300% of the federal poverty line defined by the federal Bureau of the Census and published annually by the U.S. Department of Health and Human Services. This is only to be used by consumers to self-identify their income status, not to be used as a means test to qualify for the program.
Mandated Reporter	In California, any individual that has assumed full or intermittent care of an elder or a dependent adult through the course of his or her work.
OCM	Office of Contract Management, Human Services Agency
SFHSA	San Francisco Human Services Agency
Service Unit	1 training session; 1 MDT/EDDRT meeting; 1 mandated reporter trained/individual reached (as indicated below in Service Objectives)
SOGI	Sexual Orientation and Gender Identity, a result of Ordinance No. 159-16 which amended the San Francisco Administrative Code to require City departments and contractors that provide health care and social services to seek to collect and analyze data concerning the sexual orientation and gender identity of the clients they serve (Chapter 104, Sections 104.1 through 104.9.)

III. Target Population

This program is designed to serve all people who can benefit from the services outlined in this Appendix, and particularly those demonstrating the greatest economic and social need. To ensure that the most vulnerable people are aware of and can benefit from this program, Grantee shall ensure that program services are accessible to the following individuals residing in San Francisco:

- Aged 60 and above, or Age 18 and above with a disability
- Persons with low to moderate income
- Persons who are socially isolated
- Persons with limited English-speaking proficiency
- Persons from communities of color or communities that have historically been under-served
- Members of the LGBTQIA+ community
- Persons at risk of institutionalization

IV. Description of Services

Contractor shall provide the following services during the term of this contract: On an annual basis, the Contractor shall provide the following services during the term of this contract:

1. Multi-Disciplinary Team Meetings:

High Risk Self-Neglect MDT and Adult Maltreatment MDT

- a. Organize, schedule, and facilitate regular meetings for APS to present challenging cases that require collaboration between multiple programs or agencies to address the protection issues of the client. The Adult Maltreatment and High-Risk Self-Neglect (HRSN) MDT meetings will act as a forum for deliberation and planning interventions for the cases to improve outcomes for the client.
 1. The Adult Maltreatment MDT focuses on cases of alleged abuse, neglect, or exploitation of the client
 2. The HRSN MDT is focused on situations wherein the primary challenge is a matter of self-neglect of physical care, residence, and/or financial self-neglect.
- b. Offer quarterly Adult Maltreatment MDTs that are open to partner agencies to present cases of alleged older adult or dependent adult maltreatment (both High Risk Self Neglect and Adult Maltreatment formats)
- c. Provide a statistical database to capture such variables as incidence and types of abuse, breakdown of referrals by age, ethnicity, sexual orientation and gender identity, allegations, as well as neighborhoods in San Francisco.
- d. Collect statistics on the number of cases reviewed by the two MDTs and the outcome of the multidisciplinary interventions.

- e. Maintain updated Memorandum of Understandings (MOU) with each participating partner of the MDTs.
- f. Provide at least one annual update/orientation re: Adult Maltreatment MDT and HRSN MDT to APS staff to help ensure understanding of the two Adult Maltreatment MDTs' role in facilitating multi-disciplinary discussions of APS cases.
- g. Carry out a survey with the HRSN MDT Partners, Adult Maltreatment MDT partners, and APS staff to evaluate effectiveness of the Contractor's coordination efforts.

2. Elder and Dependent Adult Death Review Team (EDDRT)

- a. Coordinate the EDDRT and its monthly meetings, including setting and coordinating meetings, taking minutes, retaining signed confidentiality forms, and keeping statistics about the deceased elders and dependent adults that are reviewed at the EDDRT.
- b. Work directly with APS in seeking suitable replacement members should there be a need to change or expand the composition of professional collaborators in the review team.
- c. Collect statistics on the number of cases reviewed by the EDDRT and the recommendations by the review team and assist with the preparation of any EDDRT reports that are compiled by the team.
- d. Maintain updated Memorandum of Understandings (MOU) with each participating partner of the EDDRT
- e. Carry out a survey with the EDDRT Partners to evaluate effectiveness of the Contractor's coordination efforts.
- f. Provide at least one annual update/orientation re: the EDDRT to APS staff to help ensure their understanding of the EDDRT's role in informing APS practice improvement (may be combined with MDT update presentations)

3. Mandated Reporter Training

- a. Provide training to mandated reporters focused on the identification, prevention, and reporting to APS incidences of suspected abuse, neglect, self-neglect or exploitation, including financial exploitation and scams.
 - 1. Mandated reporter training is required for law enforcement, service providers, nurses, social workers, financial services employees as listed in subdivisions (v), (w), and (x) of W&I Code Section 15610.17, as well as mandated reporters of suspected financial abuse of an elder or dependent adult pursuant to Sections 15630.1 and 15630.2. These trainings must reach the targeted outreach, and do so through a minimum of 6 training events. The reporting will cover:
 - 1. An explanation of abuse and neglect of an elder or dependent adult, as defined in this chapter.
 - 2. Information on how to recognize potential abuse and neglect of an elder or dependent adult.

3. Information on how the county adult protective services agency investigates reports of known or suspected abuse and neglect.
 4. Instructions on how to report known or suspected incidents of abuse and neglect, including the appropriate telephone numbers to call and what types of information would assist the county adult protective services agency with its investigation of the report.
- b. Carry out a survey of the mandated reporters trained to evaluate the effectiveness of the Contractor’s training efforts.

The minimum annual units of services to be provided through this funding is 856 for the shortened Year 1 period, and in Years 2, 3 and 4 is 1,053 (breakdown provided in **VI. Service Objectives**)

V. Location and Time of Services

The meetings in this document are intended to be hosted online using applications approved by the grantor. Alternatively, with approval from the grantor, the meetings may be held in the office of Adult Protective Services at 1650 Mission Street. Should the grantor and partner members of the MDT and EDDRT meetings elect, a hybrid of in-person and online options may be approved. Mandated reporter trainings may be held virtually, or off-site in San Francisco if required, and may be required outside of normal business hours. If an agency or organization from the criteria listed in the above California W&I Code does not have the ability to receive training during normal business hours, the Contractor will work with the organization to schedule a training that meets the needs of the mandated reporter group.

VI. Service Objectives

On an annual basis, Contractor shall meet the following service objectives:

Year 1: September 1, 2025 to June 30, 2026

Activity	Service Unit Measure	No. of Units
High-Risk Self Neglect (HRSN) MDT meetings	1 Meeting	17
Adult Maltreatment MDT meetings	1 Meeting	13
Open Adult Maltreatment MDT meetings (partner agencies can present)	1 Meeting	4
Biannual Feedback/Evaluation Meetings (covering HRSN MDT, Adult Maltreatment MDT, and EDDRT meeting)	1 Meeting	2
Mandated Reporter Training - reporters	1 Mandated Reporter trained	850
Mandated Reporter Training – training events	1 Training event	5
Evaluation surveys (HRSN MDT, Adult Maltreatment MDT, EDDRT Partners, Mandated Reporters)	1 Survey	4
APS presentation/update (combined for 3 service areas)	1 Presentation	1

Activity	Service Unit Measure	No. of Units
Year 1 Service Units	All combined	896
Unique Mandated Reporters trained	1 Mandated Reporter	850

Year 2: July 1, 2026 – June 30, 2027

Year 3: July 1, 2027 – June 30, 2028

Year 4: July 1, 2028 – June 30, 2029

Activity	Service Unit Measure	No. of Units
High-Risk Self Neglect (HRSN) MDT meetings	1 Meeting	20
Adult Maltreatment MDT meetings	1 Meeting	16
Open Adult Maltreatment MDT meetings (partner agencies can present)	1 Meeting	4
Biannual Feedback/Evaluation Meetings (covering HRSN MDT, Adult Maltreatment MDT, and EDDRT meeting)	1 Meeting	2
Mandated Reporter Training - reporters	1 Mandated Reporter trained	1,000
Mandated Reporter Training – training events	1 Training event	6
Evaluation surveys (HRSN MDT, Adult Maltreatment MDT, EDDRT Partners, Mandated Reporters)	1 Survey	4
APS presentation/update (combined for 3 service areas)	1 Presentation	1
Total Annual Service Units	All combined	1,053
Unique Mandated Reporters trained	1 Mandated Reporter	1,000

VII. Outcome Objectives

On an annual basis, Contractor will meet the following service objectives:

1. Multi-Disciplinary Team Meetings:

High Risk Self-Neglect MDT and Adult Maltreatment MDT

- a. The HRSN MDT shall demonstrate value to the APS program through the reduction in risk factors for cases presented in the HRSN MDT forum. 80% of cases presented to the HRSN MDT shall have a net reduction of risk factors score from the pre-test score at case opening, and post-test score at closure of the case as reported in the APS client management database LEAPS.
- b. In surveys conducted by the Contractor, a minimum of 80% of respondents to the HRSN MDT Partners survey will indicate that the Contractor’s coordination efforts were appropriate, relevant, and adequate.
- c. The Adult Maltreatment MDT shall demonstrate value to the APS program through the reduction in risk factors for cases presented in the closed forums. 80% of cases presented to the Adult Maltreatment MDT shall have a net reduction of risk factors score from the pre-test score at case opening, and post-test score at closure of the case.

1. This excludes clients presented by outside partners in open MDT meetings who will not have risk scores in the APS system.
- d. A minimum of 80% of respondents to the Adult Maltreatment MDT partners survey will indicate that the Contractor’s coordination efforts were appropriate, relevant, and adequate.

2. Elder and Dependent Adult Death Review Team (EDDRT)

- a. In surveys conducted by the Contractor, a minimum of 80% of respondents to the EDDRT Partners survey will indicate that the Contractor’s coordination efforts were appropriate, relevant, and adequate.
- b. In a survey of APS staff present in the annual update/orientation to the EDDRT will indicate the presentation was effective to APS staff in understanding the role of the EDDRT in understanding of the EDDRT’s role in informing APS and City practice improvement

3. Mandated Reporter Training

- a. At least 80% of community partners surveyed will indicate good or excellent on an evaluation form of Contractor’s education/training sessions.
- b. At least 75% of mandated reporters responding to surveys conducted by the Contractor will state that they will be more likely to report suspected elder/dependent adult abuse because of the training.

VIII. Data Collection and Reporting Requirements

Contractor will provide various reports during the term of the grant agreement.

1. Contractor shall input all required data into the Contracts Administration, Reporting, and Billing Online (CARBON) database by the 5th working day of the month for the preceding month.
2. Contractor shall submit to DAS/APS a quarterly report on the Elder Abuse Prevention Quarterly Activity Report (Report form to be provided)
3. Contractor shall submit to DAS/APS an EDAAP Quarterly Report capturing the data elements indicated in the Description of Services (Section II.A) and Service Objectives (Section II.B.1)

QUARTER	REPORT PERIOD	DUE DATE FROM CONTRACTOR
Q1	July 1 – September 30	October 15
Q2	October 1—December 31	January 15
Q3	January 1 – March 31	April 15
Q4	April 1 – June 30	July 15

4. Contractor shall issue a Fiscal Closeout Report at the end of the fiscal year. The report shall be entered into CARBON and is due to HSA no later than July 31st.
5. Contractor shall report total Elder Abuse Prevention Federal and Local funds separately in their audited financial statements (in tables or in text). These expenditures, based upon invoiced payments, will be reported by HSA to the provider in time for inclusion. Contractor staff shall keep

- records of time studies or other basis of documenting actual time spent and charged to the program.
6. Contractor will provide an annual consumer satisfaction survey report to DAS/APS by March 15th.
 7. Contractor shall develop and deliver an annual summary report of SOGI data collected in the year as required by state and local law. The due date for submitting the annual summary report is July 15th.
 8. Contractor shall develop and deliver ad hoc reports as requested by HSA.

For assistance with reporting requirements or submission of reports, contact:

Ben Seisedos	Tara Alvarez
Senior Analyst	Senior Contract Manager
DAS APS	HSA
Ben.Seisedos@SFgov.org	Tara.Alvarez@SFgov.org

IX. Monitoring Activities

- A. Program Monitoring: Program monitoring will include review of organization's org chart, vacancies, adherence to policies for complaints, review of service units, as well as satisfaction surveys.
- B. Fiscal Compliance and Contract Monitoring: Fiscal monitoring will include review of the Contractor's organizational budget, the general ledger, quarterly balance sheet, cost allocation procedures and plan, State and Federal tax forms, audited financial statement, fiscal policy manual, supporting documentation for selected invoices, cash receipts and disbursement journals. The compliance monitoring will include review of Personnel Manual, Emergency Operations Plan, Compliance with the Americans with Disabilities Act, subcontracts, and MOUs, and the current board roster and selected board minutes for compliance with the Sunshine Ordinance.

HUMAN SERVICES AGENCY BUDGET SUMMARY BY PROGRAM

Contractor: Institute on Aging				Full Term:	9/1/25 - 6/30/29
Program: Elder & Dependent Adult Abuse Prevention (EDAAP)				Effective Date:	9/1/2025
New <input checked="" type="checkbox"/> Modification <input type="checkbox"/> Revision <input type="checkbox"/> Check One)				Modification #	
	9/1/25 - 6/30/26	7/1/26 - 6/30/27	7/1/27 - 6/30/28	7/1/28 - 6/30/29	9/1/25 - 6/30/29
Expenses	Original	Original	Original	Original	Total
Salaries & Benefits	\$351,985	\$422,383	\$422,383	\$422,383	\$1,619,134
Operating-Direct	\$28,451	\$34,139	\$34,139	\$34,139	\$130,868
Subtotal	\$380,436	\$456,522	\$456,522	\$456,522	\$1,750,002
Indirect Percentage (%)	15%	15%	15%	15%	15%
Indirect Costs (Line 16 X Line 15)	\$57,064	\$68,478	\$68,478	\$68,478	\$262,498
Consultant/Subcontractor (\$50,000+)					
Direct Client Pass-Through					
Capital Expenses					
Total Expenses	\$437,500	\$525,000	\$525,000	\$525,000	\$2,012,500
HSA / DAS Revenues					
General Fund	\$437,500	\$525,000	\$525,000	\$525,000	\$2,012,500
Total HSA / DAS Revenues	\$437,500	\$525,000	\$525,000	\$525,000	\$2,012,500
Grantee/Contractor Revenues					
Total Grantee/Contractor Revenues					
Total Revenues	\$437,500	\$525,000	\$525,000	\$525,000	\$2,012,500
Prepared by:					
<i>Telephone No. & Email:</i>				<i>HSA Budget Form (3/24)</i>	

Contractor: Institute on Aging													Appendix B, Page 2	
Program: Elder & Dependent Adult Abuse Prevention (EDAAP)														
Salaries & Benefits Detail														
POSITION TITLE	Agency Totals		HSA Program		9/1/25 - 6/30/26	Agency Totals		HSA Program		7/1/26 - 6/30/27	7/1/27 - 6/30/28	7/1/28 - 6/30/29	9/1/25 - 6/30/29	
	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Original	Annual Full Time Salary for FTE	Total FTE	% FTE funded by HSA (Max 100%)	Adjusted FTE	Original	Original	Original	Total	
Lead Supervisor Consultative Services	\$107,389	1.00	90%	0.90	\$80,541	\$107,389	1.00	90%	0.90	\$96,650	\$96,650	\$96,650	\$370,491	
Senior Program Development Specialist	\$93,595	1.00	100%	1.00	\$77,996	\$93,595	1.00	100%	1.00	\$93,595	\$93,595	\$93,595	\$358,781	
Outreach & Engagement Specialist	\$75,000	1.00	55%	0.55	\$34,375	\$75,000	1.00	55%	0.55	\$41,250	\$41,250	\$41,250	\$158,125	
Manager, Community Programs	\$122,783	1.00	15%	0.15	\$15,348	\$122,783	1.00	15%	0.15	\$18,417	\$18,417	\$18,417	\$70,599	
Director of SF Programs	\$154,666	1.00	5%	0.05	\$6,444	\$154,666	1.00	5%	0.05	\$7,733	\$7,733	\$7,733	\$29,643	
Program Development Specialist	\$80,261	1.00	100%	1.00	\$66,884	\$80,261	1.00	100%	1.00	\$80,261	\$80,261	\$80,261	\$307,667	
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TOTALS	\$633,693	6.00	3.65	3.65	\$281,588	\$633,693	6.00	365%	3.65	\$337,906	\$337,906	\$337,906	\$1,295,306	
FRINGE BENEFIT RATE	25%									25%				
EMPLOYEE FRINGE BENEFITS					\$70,397					\$84,477	\$84,477	\$84,477	\$323,828	
TOTAL SALARIES & BENEFITS					\$351,985					\$422,383	\$422,383	\$422,383	\$1,619,134	

HSA Budget Form (3/24)

Contractor: Institute on Aging
Program: Elder & Dependent Adult Abuse Prevention (EDAAP)

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Operating Expenses Detail

	9/1/25 - 6/30/26 Original	7/1/26 - 6/30/27 Original	7/1/27 - 6/30/28 Original	7/1/28 - 6/30/29 Original	9/1/25 - 6/30/29 Total
<u>Expenditure Category</u>					
Rental of Property	\$2,500	\$3,000	\$3,000	\$3,000	\$11,500
Utilities(Elec, Water, Gas, Phone, Garbage)	\$1,667	\$2,000	\$2,000	\$2,000	\$7,667
Office Supplies, Postage	\$1,667	\$2,000	\$2,000	\$2,000	\$7,667
Building Maintenance Supplies and Repair					
Printing and Reproduction					
Insurance	\$300	\$360	\$360	\$360	\$1,380
Staff Training	\$2,042	\$2,450	\$2,450	\$2,450	\$9,392
Staff Travel-(Local & Out of Town)	\$1,464	\$1,756	\$1,756	\$1,756	\$6,732
Rental of Equipment					
<u>Consulting/Professional Services</u>					
Professional Consultant (Geriatrician & neuropsychologist)	\$13,500	\$16,200	\$16,200	\$16,200	\$62,100
<u>Other</u>					
Marketing	\$1,311	\$1,573	\$1,573	\$1,573	\$6,030
Technology and Licenses	\$4,000	\$4,800	\$4,800	\$4,800	\$18,400
<u>Total Operating Expense</u>	\$28,451	\$34,139	\$34,139	\$34,139	\$130,868

HSA Budget Form (3/24)