



BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: July 15, 2025

* = Mandatory, information must be provided

or Procurement Director Award: ☐

***Contractor/Vendor Name/Grantor (DBA):**

Arizona Department of Health Services (ADHS)

***Project Title/Description:**

Public Health Improvement Program (PHI)

***Purpose:**

Amendment #3 provides scope changes and an annual price sheet for years beginning with FY2025-2026. The scope changes are primarily related to food purchases as detailed in Section 8.2, though other minor changes are also made and highlighted in red. On page 14 of the grant amendment, the Federal Award Identification Number (FAIN), Federal Award Date, Period of Performance dates and Budget Period dates are "TBD". The current FAIN will run out during the current budget period and the new federal award details are not yet known. The information listed as TBD on page 14 will need to be updated once the new federal award occurs.

This funding supports continued organizational improvement efforts in the Health Department. Pima County Health Department will use these funds to improve efficiency and effectiveness, increase performance management capacity and enhance public health readiness activities.

***Procurement Method:**

The grant amendment was reviewed and signed by PCAO.

***Program Goals/Predicted Outcomes:**

- Assist in the professional development of a competent public health workforce at the Pima County Health Department.
- Achieve process and systems improvements across multiple divisions and programs through utilizing Project Management and Lean Six Sigma tools and other performance and quality improvement methodologies.
- Strengthen organizational capacity for accreditation in order to achieve and maintain public health accreditation.

***Public Benefit:**

Improving the efficiency and effectiveness of public health programs should result in improved outcomes for Pima County residents. Achievement of public health accreditation helps ensure the public that the health department's operations reflect nationally recognized best practices.

***Metrics Available to Measure Performance:**

- Number of professional development and clinical (Basic Life Support - BLS/CPR) trainings offered and delivered to staff.
- Number of Performance and Quality Improvement trainings (Lean Six Sigma) offered and delivered to staff.
- Number of staff certified in Lean Six Sigma (White, Yellow, Green and Black) and BLS/CPR trainings.
- Number of performance improvement projects completed throughout programs and divisions.
- Number of PHAB accreditation documents completed, reviewed, edited and submitted for the fiscal year.

***Retroactive:**

Yes. This Amendment was originally scheduled for the July 1, 2025 BOS meeting. However, it was noted that Exhibit B on page 14 of the amendment did not have the required 3-way match (Vendor Name, Dates and Monetary amounts) and it was returned to ADHS. Therefore, the amendments was not able to move forward until the July 15, 2025 BOS meeting.

GMI approves
6/27/2025
LBW

THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (*) fields

Contract / Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____
Commencement Date: _____ Termination Date: _____ Prior Contract Number (Synergen/CMS): _____
☐ Expense Amount \$ _____ * ☐ Revenue Amount: \$ _____

***Funding Source(s) required:** _____

Funding from General Fund? ☐ Yes ☐ No If Yes \$ _____ % _____

Contract is fully or partially funded with Federal Funds? ☐ Yes ☐ No

If Yes, is the Contract to a vendor or subrecipient? _____

Were insurance or indemnity clauses modified? ☐ Yes ☐ No

If Yes, attach Risk's approval.

Vendor is using a Social Security Number? ☐ Yes ☐ No

If Yes, attach the required form per Administrative Procedure 22-10.

Amendment / Revised Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____

Amendment No.: _____ AMS Version No.: _____

Commencement Date: _____ New Termination Date: _____

Prior Contract No. (Synergen/CMS): _____

☐ Expense ☐ Revenue ☐ Increase ☐ Decrease

Amount This Amendment: \$ _____

Is there revenue included? ☐ Yes ☐ No If Yes \$ _____

***Funding Source(s) required:** _____

Funding from General Fund? ☐ Yes ☐ No If Yes \$ _____ % _____

Grant/Amendment Information (for grants acceptance and awards)

☐ Award ☒ Amendment

Document Type: Grant Amendment Department Code: HD Grant Number (i.e., 15-123): 70304

Commencement Date: _____ Termination Date: _____ Amendment Number: 03

☐ Match Amount: \$ _____ ☒ Revenue Amount: \$ 113,700.00

***All Funding Source(s) required:** Preventive Health and Health Services Block Grant, CDC funding passed through ADHS

***Match funding from General Fund?** ☐ Yes ☒ No If Yes \$ _____ % _____

***Match funding from other sources?** ☐ Yes ☒ No If Yes \$ _____ % _____

***Funding Source:** _____

***If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?**
Via Arizona Department of Health Services, CTR060592

Contact: Sharon Grant

Department: Health

Telephone: 724-7842

Department Director Signature: _____ Date: 6-24-25

Deputy County Administrator Signature: _____ Date: 6-27-2025

County Administrator Signature: _____ Date: 6/27/2025



INTERGOVERNMENTAL AGREEMENT (IGA)

Amendment

ARIZONA DEPARTMENT OF
HEALTH SERVICES
OFFICE OF PROCUREMENT

150 N. 18th Ave., Suite 530
Phoenix, Arizona 85007

Contract No.: CTR060592

IGA Amendment No: Three (3)

Procurement Officer:
Kristine Yaw

Public Health Improvement Program

It is mutually agreed that the Intergovernmental Agreement referenced is amended as follows:

1. Pursuant to Terms and Conditions, Provision Six (6) Contract Changes, subsection 6.1 Amendments, Purchase Orders and Change Orders, the agreement is hereby revised with the following:

- 1.1. The Scope of Work is revised and replaced.
- 1.2. The Price Sheet is revised and replaced.
- 1.3. Exhibit A is revised and replaced.
- 1.4. Exhibit B is revised and replaced.

ALL CHANGES ARE REFLECTED IN RED

All other provisions of this agreement remain unchanged.

Pima County Health Department

Contractor Name:

3950 S. Country Club Rd, Suite 100

Address:

Tucson

Arizona

85714

City

State

Zip

County Authorized Signature

Print Name

Title and Date

Pursuant to A.R.S. § 11-952, the undersigned public agency attorney has determined that this Intergovernmental Agreement is in proper form and is within the powers and authority granted under the laws of Arizona

This Intergovernmental Agreement Amendment shall be effective the date indicated. The Public Agency is hereby cautioned not to commence any billable work or provide any material, service or construction under this IGA until the IGA has been executed by an authorized ADHS signatory.

State of Arizona

Signature

Date

Signed this _____ day of _____ 2025

Sabrina Fladness

Print Name

Procurement Officer

Contract No.: CTR060592 which is an Agreement between public agencies, has been reviewed pursuant to A.R.S. § 11-952 by the undersigned Assistant Attorney, who has determined that it is in proper form and is within the powers and authority granted under the laws of the State of Arizona.

Signature

Date

REVIEWED BY

Appointing Authority or Designee
Pima County Health Department

Print Name

Assistant Attorney General



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Scope Of Work

1. Background

- 1.1. The vision of the Arizona Department of Health Services (ADHS) is "Health and Wellness for all Arizonans." The ADHS conducts a five (5) year statewide needs assessment, the Arizona State Health Assessment (SHA), to examine key health indicators and provide a comprehensive overview of the health of Arizonans. Annual updates to the SHA are also published. ADHS published the [Arizona State Health Assessment: 2022 Annual Update](#) which utilizes an evidence-based public health approach to improve the health and wellness of Arizona residents. Findings from the SHA inform the priorities outlined in the [2021-2025 Arizona Health Improvement Plan \(AzHIP\)](#) and guide programming within ADHS, including that under the Centers for Disease Control and Prevention (CDC)-funded Preventive Health and Health Services Block Grant. The AzHIP creates a roadmap to improve the health of Arizonans over the next five (5) years through the development of partnerships and resources to work collectively on shared health improvement goals and strategies.
- 1.2. This Agreement is being established to provide funding to the Local County Health Department to implement the Public Health Improvement (PHI) Program within their county.
- 1.3. The PHI Program is funded through the Preventive Health and Health Services Block Grant.
- 1.4. This current iteration of the PHI Program was initiated in July 2020 and was originally funded through the fixed price, integrated Healthy People, Healthy Communities (HPHC) Intergovernmental Agreement (IGA). In July 2022, the PHI Program scope and funding were moved to a separate cost-reimbursement Agreement.
- 1.5. The ADHS Bureau of Women's and Children's Health (BWCH) administers the federally funded Preventive Health and Health Services Block Grant, in addition to other federally funded, state-funded, and privately funded programs;
- 1.6. The [Preventive Health and Health Services Block Grant Program](#) was established in 1981 through the consolidation of several previously categorical health and social service grants (e.g., emergency medical services, hypertension, home health services, health education and risk reduction, urban rodent control, and community water fluoridation). The Preventive Health and Health Services Block Grant Program provides federal funding for sixty-one (61) recipients: all fifty (50) states, the District of Columbia, two (2) American Indian tribes, five (5) US territories, and three (3) freely associated states and is administered by CDC's Center for State, Tribal, Local, and Territorial Support.
- 1.7. The Preventive Health and Health Services Block Grant gives recipients the ability to address prioritized public health needs in their jurisdictions in collaboration with local and tribal public health agencies and organizations. Recipients set their own goals and program objectives and implement local strategies to address their prioritized public health needs related to [Healthy People 2030](#) objectives.
- 1.8. The [Preventive Health and Health Services Block Grant Measurement Framework](#) allows for standardized data collection and aggregation of the outputs, outcomes, and achievements of health departments using grant funds. The framework consists of four (4) key measures:
 - 1.8.1. Improvement in the capacity of information systems to collect or enhance data that provide information of public health importance **was improved or maintained**,
 - 1.8.2. Improvement in the efficiency or effectiveness of operations, programs, or services,
 - 1.8.3. Emerging public health needs addressed, and

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	<p>Contract No.: CTR060592</p>	<p>IGA Amendment No: Three (3)</p>	<p>Procurement Officer: Kristine Yaw</p>

1.8.4. Evidence-based public health interventions implemented.

1.9. Key populations of interest for the PHI Program are: all Arizonans.

2. Purpose

The purpose of this Agreement is to leverage partnerships between ADHS and Local County Health Departments by providing Preventive Health and Health Services Block Grant funding to support the implementation of high impact strategies that address the health priorities identified in the AzHIP and County Health Improvement Plans (CHIPs). This Agreement is intended to provide flexibility to the Local County Health Department to meet the needs of local communities.

3. Objective

3.1. The County shall implement evidence-based/evidence-informed strategies at the local community level that:

- 3.1.1. Promote and implement healthy community interventions that target policy, system and environmental approaches that will shape the communities in which we live, learn, work, and play, and
- 3.1.2. Promote and implement healthy people interventions that target individual behavior and support making healthy choices.

4. Scope of Work

4.1. Under the PHI Program, the county health departments may use several strategies to support local initiatives to achieve healthy communities. As health departments often may not have dedicated funds and resources to build and strengthen their organizations, the Public Health Improvement funds allow for that flexibility within the established strategies. The funds may be used for activities to seek accreditation and re-accreditation, improve health department efficiency and effectiveness, increase performance management capacity, and enhance public health readiness activities in the face of emerging issues;

4.2. The County shall select one (1) or more strategies from the strategic areas outlined below:

4.2.1. Strategic Area: Seeking Public Health Accreditation Board (PHAB) Accreditation or Reaccreditation

4.2.1.1. Implement activities, training, and tools for the Local Health Department (LHD) to apply for PHAB accreditation; and

4.2.1.2. Implement activities, training, and tools for the LHD to achieve PHAB reaccreditation sustainability.

4.2.2. Strategic Area: Evaluate and Continuously Improve Processes, Programs, Quality Improvement, and Interventions Performance Management

4.2.2.1. Implement tools or training to develop or maintain a performance management system supported by leadership and management to monitor achievement of organizational objectives;

4.2.2.2. Implement activities, tools, or training to develop or maintain a culture of quality improvement integrated into organizational practice, processes, and interventions; and



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4.2.2.3. Conduct training or capacity building with local stakeholders to support the department's and county's implementation of a quality improvement plan or quality improvement activities.

4.2.3. Strategic Area: Maintain a Competent Workforce

4.2.3.1. Implement activities and training to build multidisciplinary skills needed for the health department to achieve its mission, goals, and objectives;

4.2.3.2. Implement activities to build and support a health department with a supportive work environment, employee recognition, employee wellness efforts, and professional development; and

4.2.3.3. Conduct activities to support the larger public health workforce of the community

4.2.4. Strategic Area: Conduct and Disseminate Assessments Focused on Population Health Status and Public Health Issues Facing the Community

4.2.4.1. Conduct collaborative activities with the community to develop, enhance, and disseminate the community health assessment.

4.2.5. Strategic Area: Develop Policies and Plans

4.2.5.1. Conduct or participate in collaborative activities with the community to develop and implement the community health improvement plan;

4.2.5.2. Conduct activities to track and implement goals set in the county health improvement plan;

4.2.5.3. Complete activities to develop, implement, and maintain a strategic plan; and

4.2.5.4. Complete activities to develop, implement, and maintain an all hazards emergency operations plan.

4.2.6. Strategic Area: Health Equity


4.2.6.1. Develop and implement strategies that address health inequity and cultural competence.

4.2.7. Strategic Area: Administrative and Management Capacity

4.2.7.1. Develop and maintain internal health department policies and procedures for operations, human resources, information management, financial management, and management of ethical issues.

4.3. In addition, with prior approval from ADHS, the County can also use their PHI Program funding to address emerging issues:

4.3.1. Conduct activities to address an emerging health issue aligned with state and nationally identified emerging health issues (percentage (%) of funds to be approved by ADHS).

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5. Evaluation

- 5.1. Performance measures and evaluations allow the Counties and ADHS to collaboratively track progress on process indicators, outcomes measures, and impacts. As part of the local evaluation plan, the Counties shall be responsible for measuring the short-term and intermediate outcomes. Monitoring progress on short-term outcomes provides an opportunity for the County to make adjustments to strategies to ensure increased long term impact. ADHS, in coordination with the Counties, will be responsible for measuring the long-term and impact outcomes. Process indicators, outcomes measures, and impacts must clearly relate to the selected strategies and activities identified within each County's Annual Action Plan; and
- 5.2. ADHS will provide technical support to The County on selecting the appropriate indicators to measure process and outcomes as they align with the 2021-2025 AzHIP priorities and Healthy People 2030 objectives for the PHI Program.

6. Approvals

- 6.1. The quarterly reports, annual action plans, annual budget workbook, and monthly Contractor Expense Reports (CER) (Exhibit C) with receipts supporting expenses billed for in-state and out-of-state travel and equipment purchases of \$250 or more, as required and/or requested shall be approved by ADHS prior to payment reimbursement;
- 6.2. Upon approval of the Action Plan, any changes to the approved activities, or strategies must be resubmitted to ADHS for review and approval prior to implementation;
- 6.3. Any requests to provide additional information on quarterly reports will require resubmission of the report for ADHS review and approval prior to payment reimbursement;
- 6.4. Purchases of Capital Equipment (single item purchase of \$5,000 or more) will require written approval prior to purchasing. Approval shall be requested in writing to the ADHS Block Grants Program Manager:
 - 6.4.1. Requests can be made via email and shall include the following information:
 - 6.4.2. Type of equipment requesting to be purchased,
 - 6.4.3. Cost of equipment, and
 - 6.4.4. How the proposed purchase supports the current approved scope of work and annual action plan.
- 6.5. All marketing materials (the use of ADHS logo, brochures, posters, public service announcements, paid media, videos, etc.) which have been developed, written, published, or recorded by the Counties and paid for with funds from this award must be first approved by ADHS prior to the dissemination of such materials or airing or use of such announcements;
- 6.6. All County local emerging issues and related supporting documentation must be approved by ADHS prior to implementation and the percentage of funds used to conduct activities to address an emerging health issue aligned with state and nationally identified emerging health issues must be approved by ADHS prior to implementation; and
- 6.7. Any evaluation or study to be conducted that involves human subjects must be approved by ADHS prior to conducting.

	<p style="text-align: center;">INTERGOVERNMENTAL AGREEMENT (IGA)</p> <p style="text-align: center;">Amendment</p>		<p>ARIZONA DEPARTMENT OF HEALTH SERVICES OFFICE OF PROCUREMENT 150 N. 18th Ave., Suite 530 Phoenix, Arizona 85007</p> <p>Procurement Officer: Kristine Yaw</p>
	Contract No.: CTR060592	IGA Amendment No: Three (3)	

7. Tasks

7.1. The County shall:

- 7.1.1. Develop and submit a separate Annual Budget Workbook, due January 15th of each year for the following year's budget period, including the federally approved indirect rate letter,
- 7.1.2. Develop and implement an Annual Action Plan within the first (1st) forty-five (45) days of each budget period (i.e., on or before August 15th),
- 7.1.3. Implement the selected, approved, evidence-based and/or evidence-informed strategies outlined in County Action Plans,
- 7.1.4. Participate in all calls (monthly, bi-monthly, quarterly), technical assistance calls, webinars, meetings, and training,
 - 7.1.4.1. **This includes completing the [ADHS CLAS Training](#).**
- 7.1.5. Participate in the development of a shared comprehensive evaluation plan and report out on any performance measures related to the implementation of their activities (process and/or intermediate), or as defined by the funding sources,
- 7.1.6. Provide receipts supporting expenses billed for any in-state/out-of-state travel and equipment purchases of \$250 or more are to also be submitted, and
- 7.1.7. Provide upon request from ADHS all receipts supporting expenses billed for a selected for review.
- 7.1.8. Tag and inventory equipment in compliance with the policy in the State of Arizona Accounting Manual, <https://gao.az.gov/sites/default/files/2535%20Stewardship%20190304.pdf>;
- 7.1.9. Maintain documents pertaining to the asset, i.e., receiving papers, invoice, purchase order, receipt, etc., and
- 7.1.10. Documents shall include the make, model, serial number, and acquisition date of the asset.
- 7.1.11. Submit brochures, posters, public service announcements, paid media, videos, sponsorships, etc., to be paid for with funds from this IGA prior to development and use.

8. Requirements

- 8.1. All in-state and out-of-state travel shall follow the travel and per diem policies as outlined in the State of Arizona Accounting Manual (SAAM);
- 8.2. Food purchases **are allowed within guidelines for federally funded programs. Contractor shall submit a Request for Food form (Attachment F) to the ADHS Block Grants Program Manager when needing to purchase food for the MCH and/or PHI Program:**
 - 8.2.1. **Requests shall be submitted at a minimum of eight (8) weeks prior to an event or eight (8) weeks prior to an internal deadline needing to be met;**



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- 8.2.2. Total food purchased throughout a fiscal year cannot exceed three percent (3%) of the total annual program budget;
- 8.2.3. Food purchases must not exceed the allowable ADHS per person, per diem meal rates as outlined in the State of Arizona Accounting Manual (SAAM)
- 8.2.4. The food provided should be healthy items. Please see the [ADHS Healthy Meeting Policy](#) for further guidance on nutritional guidelines for events/meetings:
- 8.2.4.1. Offer healthy food options and portion sizes consistent with the most current USDA Dietary Guidelines for Americans. This includes ensuring a variety of healthy food options such as lean protein choices, vegetables, fruits, and whole grain products;
 - 8.2.4.2. Employ food safety practices when preparing, serving, and cleaning up when food and beverages are served at meetings. Pay particular attention to perishable food items such as fruits, vegetables, dairy, and meat products;
 - 8.2.4.3. Offer healthy beverage options such as water, 100% fruit or vegetable juice, low-fat and fat-free milk, and dairy alternatives. Provide beverages with minimal to no added sugar;
 - 8.2.4.4. Provide healthy snack options in single-serving portions and include lower-sodium snacks. This includes at least one fruit or vegetable item.
- 8.2.5. A speaker/presentation during the time the meal is provided is required.
- 8.2.6. Justification for providing food at events requires but is not limited to:
- 8.2.6.1. How providing food serves a valid public purpose and does not violate the "gift clause";
 - 8.2.6.2. Is an integral part of the function; and
 - 8.2.6.3. Benefits to the community.
- 8.2.7. ADHS Block Grants Program Manager will review the Request for Food form and forward it to the ADHS Chief Financial Officer for final approval;
- 8.2.7.1. No food shall be purchased or reimbursed until the Request for Food form has been approved and signed by the ADHS Chief Financial Officer.
 - 8.2.7.2. Approval of an annual budget workbook allocating costs for food is not an approval to purchase food.
- 8.3. Comply with all federal reporting requirements.
- 8.4. At least one (1) Program Manager or coordinator from each of the MCH HAF IGA programs shall be in attendance at the Annual ADHS conference identified by the MCH HAF Program Manager.
- 8.5. County program staff implementing strategies in this Agreement shall be required to participate in quarterly MCH HAF IGA contractor meetings.

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	<p>Contract No.: CTR060592</p>	<p>IGA Amendment No: Three (3)</p>	<p>Procurement Officer: Kristine Yaw</p>

9. State Provided Items

9.1. ADHS will provide:

- 9.1.1. Review, feedback, and approval of the Annual Action Plan(s) within thirty (30) days of submitting;
- 9.1.2. Review, feedback, and approval of the annual Budgets Workbooks, CERs and Supporting Documentation within thirty (30) days of submission;
- 9.1.3. Feedback, technical assistance, and training to support the approved Annual Action Plan(s), Annual Budget, Quarterly Reporting, and Supporting Documentation;
- 9.1.4. Samples of evidence-based and/or evidence-informed strategies and supporting resources,
- 9.1.5. A Quarterly Reporting template upon execution of the Agreement,
- 9.1.6. The Annual Action Plan template upon execution of the Agreement,
- 9.1.7. Annual Budget Workbook and CER templates upon execution of the Agreement,
- 9.1.8. Outcome Measures and examples of process or intermediate performance measures, as needed,
- 9.1.9. Access to virtual technical assistance and guidance from ADHS staff, Local County Health Department peers/mentors, and subject matter experts related to the strategies for which the County has received funding, and
- 9.1.10. Coordination and conduct annual Contractor site visits.

9.2. Exhibit C – Contractor Expenditure Report (CER);

9.3. Exhibit D – Financial Supporting Documentation;

9.4. Exhibit E – Line Item Budget Move Request;

9.5. Exhibit F – [Request for Purchase of Food](#);

9.6. Exhibit G – Emerging Issues Approval Process; and

9.7. The following are due upon execution of the Contract:

- 9.7.1. Action Plan Template,
- 9.7.2. Quarterly Report Template,
- 9.7.3. Contractor Expenditure Report (CER) template, and
- 9.7.4. Budget Workbook Template.

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	<p>Contract No.: CTR060592</p>	<p>IGA Amendment No: Three (3)</p>	<p>Procurement Officer: Kristine Yaw</p>

10. Restrictions

10.1. Funds cannot be used for any of the following:

- 10.1.1. Lobbying activities, including the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government,
- 10.1.2. Inpatient services, **other than inpatient services provided to children with special health care needs or to high-risk pregnant women and infants and such other inpatient services as the Secretary may approve;**
- 10.1.3. Cash payments to intended service recipients of health services,
- 10.1.4. The purchase or improvements of land; the purchase, construction or permanent improvement (other than minor remodeling) of any building or other facility; or the purchase of major medical equipment – unless the ADHS has obtained a waiver from the Secretary of the Department of Health and Human Services (HHS),
- 10.1.5. Satisfying any requirements for the expenditure of non-federal funds as a condition for the receipt of federal funds,
- 10.1.6. Providing funds for research or training (or other financial assistance) to any entity other than a public or non-profit private entity, and
- 10.1.7. Payment for any item of service (other than an emergency item or service) furnished:
 - 10.1.7.1. **By an individual or entity during the period when such individual or entity is excluded under this title or title XVIII, XIX, or XX pursuant to section 1128, 1128A, 1156, or 1842(j)(2), or**
 - 10.1.7.2. **By the medical director during the period when the physician is excluded under this title or title XVIII, XIX, or XX pursuant to section 1128, 1128A, 1156, or 1842(j)(2) and when the person furnishing such item or service knew or had reason to know of the exclusion (after a reasonable time period after reasonable notice has been furnished to the person).**

11. Deliverables

11.1. The County shall:

- 11.1.1. Submit an Annual Action Plan within the first forty-five (45) days of each budget period;
- 11.1.2. Submit a **monthly Contractor Expenditure Report** (CER) to ADHS, due thirty (30) days following each month of services.
 - 11.1.2.1. Retain and submit monthly CERs and maintain sufficient documentation in the form of receipts in support of expenses incurred for any purchases that are being claimed for reimbursement or applied as match dollars to a budget;
 - 11.1.2.2. **Supporting documentation shall be kept by the Contractor and does NOT need to be submitted with the monthly CERs with the exception of travel receipts/documentation (in-state and out-**

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	Contract No.: CTR060592	IGA Amendment No: Three (3)	

of-state) and single purchases of equipment purchases of \$250 or more are to be submitted, and

11.1.2.3. Upon request from ADHS, all receipts supporting expenses billed for a selected CER shall be submitted for review.

11.1.3. Submit written Quarterly Reports, due thirty (30) days after each quarter end (Q1: July – September; Q2: October – December; Q3: January – March; and Q4: April – June);

11.1.4. Submit a final CER invoice no later than forty-five (45) days following the end of each contract year;

11.1.5. Submit an Annual Budget Workbook by January 15th for the next year's fiscal period;

11.1.6. Public Health Improvement Program ONLY: Counties shall submit their Community Health Assessment (CHA) and/or Community Health Improvement Plan (CHIP) to the ADHS PHI Program Manager within forty-five (45) days of the document being published.

11.1.7. Provide the ADHS Block Grants Program Manager with contact information of all program staff funded under this IGA within thirty (30) days of IGA execution to include:

11.1.7.1. Name, title, email address and phone numbers,

11.1.7.2. Staff Resumes, and

11.1.7.3. Program area assigned.

11.1.8. Submit to the ADHS Block Grants Program Manager all staffing and programmatic changes within fifteen (15) days providing information outlined in 11.1.7;

11.1.9. Request to transfer budget amounts between line items shall be submitted to the ADHS Block Grants Program Manager utilizing the "budget line item move" document.

11.1.9.1. Any budget transfers exceeding twenty-five percent (25%) of total annual budget or to a non-funded line item, will require a revised budget be submitted to the ADHS Block Grants Program Manager and an IGA amendment issued by ADHS Procurement.

12. NOTICES, CORRESPONDENCE, REPORTS, AND INVOICES:

12.1. Notices, correspondence, reports, supporting documentation, and CERs from the County contractors to ADHS shall be sent to:

Ashley Neves
BWCH Block Grants Program Manager
Arizona Department of Health Services
150 N. 18th Avenue
Phoenix, AZ 85007-3242
Email: ashley.voght@azdhs.gov
Phone: (480) 271-8832

12.2. Notices, Correspondence, Reports (and payment if sent to the same address) from ADHS to the Contractor shall be sent to:



INTERGOVERNMENTAL AGREEMENT (IGA)

Amendment

ARIZONA DEPARTMENT OF
HEALTH SERVICES
OFFICE OF PROCUREMENT
150 N. 18th Ave., Suite 530
Phoenix, Arizona 85007

Contract No.: CTR060592

IGA Amendment No: Three (3)

Procurement Officer:
Kristine Yaw

Pima County Health Department
Theresa Cullen, MD, MS, Director
3950 S. County Club, Suite 100
Tucson, AZ 85714
Email: Theresa.cullen@pima.gov
Phone: (520) 724-7765

	INTERGOVERNMENTAL AGREEMENT (IGA) Amendment		ARIZONA DEPARTMENT OF HEALTH SERVICES OFFICE OF PROCUREMENT 150 N. 18 th Ave., Suite 530 Phoenix, Arizona 85007 Procurement Officer: Kristine Yaw
	Contract No.: CTR060592	IGA Amendment No: Three (3)	

PRICE SHEET

July 1 – June 30

Program: Public Health Improvement (PHI) Program
Federal Funding: Preventive Health and Health Services Block Grant

Cost Reimbursement Contract Annual Price Sheet	
ACCOUNT CLASSIFICATION	LINE-ITEM TOTALS
SALARIES AND WAGES*	\$52,250.00
EMPLOYEE RELATED EXPENSES*	\$13,063.00
TRAVEL*	\$18,050.00
PROFESSIONAL & OUTSIDE SERVICES	\$0.00
CAPITAL EXPENSES	\$0.00
OTHER OPERATING EXPENSES*	\$15,507.00
INDIRECT COSTS* (15%)	\$14,830.00
Total Annual not to exceed:	\$113,700.00
<p>If applicable, the Contractor is authorized to transfer up to a maximum of twenty-five percent (25%) of the total budget amount between line items with the written approval from an ADHS program representative.</p> <p>Transfers exceeding twenty-five percent (25%) or to a non-funded line item shall require an Agreement Amendment.</p> <p align="center">*Indicated indirect rate calculation</p>	



INTERGOVERNMENTAL AGREEMENT (IGA)

Amendment

ARIZONA DEPARTMENT OF
HEALTH SERVICES
OFFICE OF PROCUREMENT
150 N. 18th Ave., Suite 530
Phoenix, Arizona 85007
Procurement Officer:
Kristine Yaw

Contract No.: CTR060592

IGA Amendment No: Three (3)

Exhibit A

eCFR eExhibit -§ 200.332

Prime Awardee: Arizona Department of Health Services
UEI# QMWUG1AMYP65

Procurement Checks:

Per § 180.300 the awarding agency must check that each subrecipient is not exclude dor disqualified. These checks can be performed in SAM.Gov.ADHS Procurement does these checks and uploads the results into APP or Euna Solutions (eCivis).

Subrecipient name (which must match the name associated with its unique entity identifier):

Pima County Health Department

Subrecipient's unique entity identifier (UEI #):

U8XUY58VDQS3

Federal Award Identification Number (FAIN, sometimes it's the same as the Grant Number):

NB01PW000059

Federal Award Date

08/27/2024

Sub-recipient/Subaward Period of Performance Start and End Date;

10/01/2023-09/30/2025

Sub-recipient/Subaward Budget Period Start and End Date:

10/01/2023-09/30/2025

Amount of Federal Funds Obligated **in the subaward:**

\$28,425.00

Total Amount of Federal Funds Obligated to the subrecipient by the pass-through entity including the current financial obligation (how much is available for contracts):

\$113,700.00

Federal award project description, as required to be responsive to the Federal Funding Accountability and Transparency Act (FFATA)

Preventive Health and Health Services Block Grant-2024

Name of Federal awarding agency, pass-through entity, and contact information for awarding official of the Pass-through entity

Centers for Disease Control and Prevention

Assistance Listings number and Title; the pass-through entity must identify the dollar amount made available under each Federal award and the Assistance Listings Number at time of disbursement: **(complete an additional form if more than one federal funding source is being used to pay for the services).**

93.991

Identification of whether the award is R&D

No

Indirect cost rate for the Federal award (including the de minimis rate is charged) per § 200.414

15%

	INTERGOVERNMENTAL AGREEMENT (IGA) Amendment		ARIZONA DEPARTMENT OF HEALTH SERVICES OFFICE OF PROCUREMENT 150 N. 18 th Ave., Suite 530 Phoenix, Arizona 85007
	Contract No.: CTR060592	IGA Amendment No: Three (3)	Procurement Officer: Kristine Yaw

Exhibit B

[eCFR eExhibit - § 200.332](#)

Prime Awardee: Arizona Department of Health Services
UEI# QMWUG1AMYF65

Procurement Checks:

Per § 180.300 the awarding agency must check that each subrecipient is not exclude ~~dog~~ disqualified. These checks can be performed in SAM.Gov ADHS Procurement does these checks and uploads the results into APP or Euna Solutions (eCivis).

Subrecipient name (which must match the name associated with its unique entity identifier): Pima County Health Department

Subrecipient's unique entity identifier (UEI #): U8XUY58VDQS3

Federal Award Identification Number (FAIN, sometimes it's the same as the Grant Number): TBD

Federal Award Date TBD

Sub-recipient/Subaward Period of Performance Start and End Date; TBD

Sub-recipient/Subaward Budget Period Start and End Date: TBD

Amount of Federal Funds Obligated in the subaward: \$85,275.00

Total Amount of Federal Funds Obligated to the subrecipient by the pass-through entity including the current financial obligation (how much is available for contracts): \$113,700.00

Federal award project description, as required to be responsive to the Federal Funding Accountability and Transparency Act (FFATA) Preventive Health and Health Services Block Grant-2024

Name of Federal awarding agency, pass-through entity, and contact information for awarding official of the Pass-through entity Centers for Disease Control and Prevention

Assistance Listings number and Title; the pass-through entity must identify the dollar amount made available under each Federal award and the Assistance Listings Number at time of disbursement: (complete an additional form if more than one federal funding source is being used to pay for the services). 93.991

Identification of whether the award is R&D No

Indirect cost rate for the Federal award (including the de minimis rate is charged) per § 200.414 15%