



BOARD OF SUPERVISORS AGENDA ITEM REPORT **CONTRACTS / AWARDS / GRANTS**

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: April 21, 2020

* = Mandatory, information must be provided

or Procurement Director Award ☐

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

Arizona Department of Health Services (ADHS)

***Project Title/Description:**

STD Control Services

***Purpose:**

The Arizona Department of Health Services (ADHS) and the Pima County Health Department (PCHD) are entering into an Intergovernmental Agreement for a five year term, beginning January 1, 2019, for STD prevention and control in Pima County. PCHD and ADHS seek to build upon the current infrastructure that provides surveillance, epidemiology, disease investigation, prevention, policy and communication to expand and identify new interventions that include: screening and treatment, partner services, outreach, community collaborations, linkage to care, and health promotions that address the target populations and geographical areas of high prevalence in Pima County. The changing health care landscape and information technology advances present opportunities and challenges to improve STD prevention programs.

Amendment #1 changes the Price Sheet for 2020, moving some funding between line items and adding \$12,207 for indirect costs (10% of direct expenses).

***Procurement Method:**

This Revenue Contract is a non-Procurement contract and not subject to Procurement rules.

***Program Goals/Predicted Outcomes:**

Decrease the prevalence and potential to transmit STD infection in the community through proper screening, timely treatment, and increased education of our most at-risk populations: adolescents, young adults, men who have sex with men, and women of childbearing age. In addition to the reporting, prevention and control measures stated in the Arizona Revised Statutes, Title 9, Chapter 6, Articles 1 through 11, the PCHD will build upon the current infrastructure that provides surveillance, epidemiology, disease investigation, prevention, policy and communication to expand and identify new interventions that include: screening and treatment, partner services, outreach, community collaborations, linkage to care, and health promotions that address the target populations and geographical areas of high prevalence in Pima County.

***Public Benefit:**

The Health Department has a statutory obligation to investigate infectious or contagious disease and adopt measures to prevent the spread of disease as referenced in ARS 36-624.

***Metrics Available to Measure Performance:**

- Increase the number of STD records with complete data for key epidemiological fields by 10%.
- Increase the number of STD records dispositioned within 30 days by 10%.
- Increase the number of early syphilis cases that have at least one partner treated in 30 days of initial test by 10%.
- Increase the number of syphilis cases that are screened for HIV/AIDS within 30 days of initial syphilis test by 15%.
- Increase the proportion of target populations (youth, MSM, and women of childbearing age) who receive at least annual STD screening by 20%.
- Reduce the percent of gonorrhea cases that receive non-CDC recommended treatment by 10%.
- Improve health department policies for STD prevention by using data to inform policy change and development.

***Retroactive:**

No.

GM! Approved 4.6.20

Revised 9/2019

Contract / Award Information

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

Effective 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.: _____

Effective Date: _____ New Termination Date: _____

Prior Contract No. (Synergen/CMS): _____

☐ Expense or ☐ 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 ☒ AmendmentDocument Type: GTAM Department Code: HD Grant Number (i.e., 15-123): 20-40Effective Date: upon signature Termination Date: _____ Amendment Number: 01☐ Match Amount: \$ _____ ☒ Revenue Amount: \$ 134,281.40***All Funding Source(s) required:** Centers for Disease Control and Prevention (federal) via 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)?**

Federal funds received via ADHS

Contact: Sharon GrantDepartment: Health Telephone: 724-7842Department Director Signature/Date: _____ 04/02/20Deputy County Administrator Signature/Date: _____ 6 April 2020County Administrator Signature/Date: _____ C. R. Mulberry 4/6/2020
(Required for Board Agenda/Addendum Items)



INTERGOVERNMENTAL AGREEMENT (IGA) AMENDMENT

ARIZONA DEPARTMENT OF
HEALTH SERVICES
150 N. 18th Avenue, Suite 530
Phoenix, Arizona 85007
Procurement Specialist:
Carlos Carranza Jr.

Contract No.: CTR040484

Amendment No.: 1
APP Amendment No.: 1

STD Control Services

Effective upon signature, it is mutually agreed that the Contract referenced is amended as follows:

1. Pursuant to the Terms and Conditions, Provision Six (6) Contract Changes, Item 6.1., Amendments, Purchase Orders and Change Orders, the Price Sheet of the Agreement is hereby revised and replaced by the Price Sheet of this Amendment One (1).

(CONTINUED ON NEXT PAGE)

ALL OTHER PROVISIONS OF THIS AGREEMENT REMAIN UNCHANGED.

CONTRACTOR SIGNATURE

Pima County Health Department

Contractor Name

3950 South Country Club Road, #100

Address

Tucson ARIZONA 85714

City State Zip

Contractor Authorized Signature

Printed Name

Title

CONTRACTOR ATTORNEY SIGNATURE

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 the State of Arizona.

Cindu Nguyen

Signature

Date

4/1/2020

Cindu Nguyen

Printed Name

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

Signed this ____ day of _____ 20____

Procurement Officer

Contract No. CTR040484, which is an Agreement between public agencies, has been reviewed pursuant to A.R.S. § 11-952 by the undersigned Assistant Attorney General, 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

Assistant Attorney General

Printed Name:

REVIEWED BY:

[Signature] 04/02/20
Appointing Authority or Designee
Pima County Health Department

	INTERGOVERNMENTAL AGREEMENT (IGA) AMENDMENT		ARIZONA DEPARTMENT OF HEALTH SERVICES 150 N. 18 th Avenue, Suite 530 Phoenix, Arizona 85007
	Contract No.: CTR040484	Amendment No.: 1 APP Amendment No.: 1	Procurement Specialist: Carlos Carranza Jr.

REVISED PRICE SHEET

Effective THROUGH December 31, 2020

COST REIMBURSEMENT LINE ITEMS	BUDGETED AMOUNT
Personnel Services	\$ 72,316.66
Employee Related Expenses (ERE)	\$ 25,310.83
Professional & Outside Services	\$ 24,441.51
Travel	\$1.00
Occupancy Expense	\$1.00
Other Operating	\$1.00
Capital Outlay Expenses	\$1.00
Other	\$1.00
Indirect	\$12,207.40
TOTAL	\$134,281.40