



BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

☐ Award ☒ Contract ☐ Grant

Requested Board Meeting Date: February 20, 2024

* = Mandatory, information must be provided

or Procurement Director Award: ☐

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

The Arizona Partnership for Immunization (TAPI)

***Project Title/Description:**

Third Party Billing.

***Purpose:**

TAPI is an organization that helps Arizona health departments bill insurance for the immunizations and other services that they provide. This revenue contract allows TAPI to bill, on behalf of the Pima County Health Department (PCHD), for services provided by the PCHD clinics for clients that carry commercial or AHCCCS (Medicaid) insurance.

Amendment #2 extends the contract for another year. It is estimated that the Health Department will receive an additional \$1,100,000 for this contract year from insurance reimbursements.

***Procurement Method:**

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

***Program Goals/Predicted Outcomes:**

The program is designed to allow PCHD to recoup some of the expenses of running public health clinics. PCHD has implemented electronic health records but does not yet have the necessary infrastructure in place to bill for services provided at the clinics. PCHD has worked with TAPI to recover some of the cost of administering immunizations for many years. This relationship has been expanded to include billing for other services provided at the clinics when the client has insurance. The amount of revenue included for this 12 month period, \$1,100,000, is an estimate only and should not be considered a minimum or a not to exceed amount.

***Public Benefit:**

Recuperating funds for services provided allows PCHD to save taxpayer money without decreasing the level of services provided.

***Metrics Available to Measure Performance:**

- # of claims submitted
- # of claims payments received
- reasons for denial of claims
- \$ received by PCHD from TAPI

***Retroactive:**

Yes. Delays in getting an estimated income amount related to this service resulted in the Contract Amendment being late. If not approved, the Pima County Health Department will not be able to take advantage of this billing service that is expected to generate a significant amount of revenue in 2024.

TO: COB, 2-7-2024(1)
Vers.: 3
pgs.: 2

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: CTN Department Code: HD Contract Number (i.e., 15-123): 22-071
Amendment No.: 02 AMS Version No.: 03
Commencement Date: 12/02/2023 New Termination Date: 12/01/2024
Prior Contract No. (Synergen/CMS): N/A

☐ Expense ☒ Revenue ☒ Increase ☐ Decrease Amount This Amendment: \$ 1,100,000.00

Is there revenue included? ☒ Yes ☐ No If Yes \$ \$1,100,000.00

***Funding Source(s) required: N/A – revenue contract**

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

Grant/Amendment Information (for grants acceptance and awards)

☐ Award ☐ Amendment

Document Type: _____ Department Code: _____ Grant Number (i.e., 15-123): _____
Commencement Date: _____ Termination Date: _____ Amendment Number: _____
☐ Match Amount: \$ _____ ☐ Revenue Amount: \$ _____

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

***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)?**

Contact: Sharon Grant

Department: Health

Telephone: 724-7842

Department Director Signature: [Signature] Date: 1/26/24

Deputy County Administrator Signature: [Signature] Date: 5 Feb 2024

County Administrator Signature: _____ Date: 2/5/24

Pima County Department of Health

Project: Third Party Billing

Contractor: The Arizona Partnership for Immunization (TAPI)
700 E. Jefferson St.
Phoenix, AZ 85034

Contract No.: CTN-HD-22-071

Contract Amendment No.: 02

| | | |
|---|---------------------------------|----------------|
| Orig. Contract Term: 12/02/2021 – 12/01/2022 | Orig. Amount: | \$ 600,000.00 |
| Termination Date Prior Amendment: 12/01/2023 | Prior Amendments Amount: | \$1,425,000.00 |
| Termination Date This Amendment: 12/01/2024 | This Amendment Amount: | \$1,100,000.00 |
| | Revised Total Amount: | \$3,125,000.00 |

CONTRACT AMENDMENT

The parties agree to amend the above-referenced contract as follows:

1. Background and Purpose.

1.1. Background. On December 2, 2021, County and Contractor entered into the above referenced agreement to provide third party billing.

1.2. Purpose. County requires to extend this Contract for an additional year and add estimated revenue for the extension period.

2. Term. The County is exercising the second extension option to renew the contract for one additional year commencing on December 2, 2023, and terminating on December 1, 2024. If the commencement date is before the Effective Date of this amendment, the parties will, for all purposes, deem the amendment to have been in effect as of the commencement date.

3. Estimated Revenue Amount. Revenue to the County is an estimate and not a guaranteed or do not exceed amount. The estimated amount of revenue under this Contract, as set forth in Section 5, is increased by \$1,100,000.00. County's total revenue under this contract is estimated at \$3,125,000.00.

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All other provisions of the Contract not specifically changed by this Amendment remain in effect and are binding upon the parties.

PIMA COUNTY

Chair, Board of Supervisors

Date

CONTRACTOR


Authorized Officer Signature

Bernie Soderberg
Printed Name and Title

1-24-2024
Date

ATTEST

Clerk of the Board

Date


APPROVED AS TO FORM

Deputy County Attorney

Jonathan Pinkney

Print DCA Name

1/23/24
Date

APPROVED AS TO CONTENT



Department Head

1/26/24
Date

Contract No.: CTN-HD-22-071-02 TAPI