



BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: April 15, 2025

* = Mandatory, information must be provided

or Procurement Director Award: ☐

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

Arizona Department of Health Services

***Project Title/Description:**

Arizona's Prescription Drug Overdose Prevention Program

***Purpose:**

Amendment #2 extends the termination date for one year and adds \$401,024.90 in funding. This amendment is awarding funds under a new Federal Award ID Number within the Substance Abuse and Mental Health Services Administration's (SAMHSA) State Opioid Response (SOR) grant. The purpose of this grant is to develop, implement, and assess relevant and proven strategies to reduce the rate of opioid drug overdoses in our community.

***Procurement Method:**

This grant award was reviewed and signed by PCAO.

***Program Goals/Predicted Outcomes:**

1. Continue to build on critical partnerships for promotion of the Arizona Prescription Drug Misuse and Abuse Initiative using the Rx Drug Misuse & Abuse Initiative Community Toolkit.
2. Continued use of public health alerts related to high-risk trends or spikes related to overdoses.
3. Targeted naloxone distribution services that includes overdose response training, resource storage and tracking, and mapping and evaluation of high burden areas.
4. Continue to facilitate quarterly overdose fatality reviews and investigations in partnership with the multi-disciplinary committee and develop formal recommendation briefs as applicable.
5. Public health case management program to include outreach to individuals involved in the justice system in order to help with accessing appropriate services.

***Public Benefit:**

This grant aims to benefit the public through the reduction of rates of drug use and drug overdose in Pima County.

***Metrics Available to Measure Performance:**

1. Number of individuals served through Case Management and contracted Peer Navigation services.
2. Number of quarterly fatality review meetings held and case reviews conducted.
3. Public facing reports and health alerts for direct service providers and first responders.
4. Number of Narcan kits distributed and agencies receiving and/or distributing.
5. Number of presentations/trainings delivered and participants at each presentation/training.

***Retroactive:**

Yes. This grant period began on 9/30/2024 but Pima County did not receive the amendment from the Arizona Department of Health Services until March 2025. If not approved, critical activities to combat the community overdose crisis will be negatively impacted.

GMI approves
KBN for RK/Kelly
3/27/25

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): 70319
Commencement Date: 09/30/2024 Termination Date: 09/29/2025 Amendment Number: 02
☐ Match Amount: \$ _____ ☒ Revenue Amount: \$ \$401,024.90

***All Funding Source(s) required:** Substance Abuse and Mental Health Services Administration (SAMHSA) 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 funding is received via the Arizona Department of Health Services

Contact: Christina Drennan

Department: Health

Telephone: 520-724-7614

Department Director Signature: [Signature] Date: 3-21-25
Deputy County Administrator Signature: [Signature] Date: 3-26-2025
County Administrator Signature: _____ Date: 3-27-2025



INTERGOVERNMENTAL AGREEMENT (IGA) Amendment

ARIZONA DEPARTMENT
OF HEALTH SERVICES
OFFICE OF PROCUREMENT

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

Contract No.: CTR063749

IGA Amendment No: Two (2)

Procurement Officer:
Nathaniel Thomas

ARIZONA'S PRESCRIPTION DRUG OVERDOSE PREVENTION 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, the Contract is hereby revised with the following:

1.1. The Price Sheet is revised and replaced.

1.1.1. The date range has been deleted in its entirety.

1.1.2. The County received approval to revise the Indirect Rate to fifteen percent (15%).

1.2. Exhibit A 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 Road, #100

Address:

Tucson

AZ

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.

Jonathan Pinkney

Print Name

Procurement Officer

Contract No.: **CTR063749**, 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

Assistant Attorney General

Print Name

	INTERGOVERNMENTAL AGREEMENT (IGA) Amendment		ARIZONA DEPARTMENT OF HEALTH SERVICES OFFICE OF PROCUREMENT 150 N. 18 th Ave., Suite 530 Phoenix, Arizona 85007
	Contract No.: CTR063749	IGA Amendment No: Two (2)	Procurement Officer: Nathaniel Thomas

REVISED PRICE SHEET

Pima County Health Department State Opioid Response (SOR) Cost Reimbursement Price Sheet	
Account Classification	Total Budget
Personnel*	\$76,669.00
ERE*	\$26,834.00
Professional & Outside Services (Indirect up to \$25,000.00)*	\$275,000.00
Travel*	\$1,800.00
Occupancy*	\$0.00
Other Operating*	\$1,023.00
Capital Outlay	\$0.00
Indirect (15%*)	\$19,698.90
TOTAL (ANNUAL NOT TO EXCEED)	\$401,024.90

*Indicated indirect rate calculation.

**With prior written approval from the Program Manager, the County is authorized to transfer up to a maximum of ten percent (10%) of the total budget amount between line items. Transfers of funds are only allowed between funded line items. Transfers exceeding ten percent (10%) or to a non-funded line item shall require an Agreement Amendment.

	INTERGOVERNMENTAL AGREEMENT (IGA) Amendment		ARIZONA DEPARTMENT OF HEALTH SERVICES OFFICE OF PROCUREMENT 150 N. 18 th Ave., Suite 530 Phoenix, Arizona 85007
	Contract No.: CTR063749	IGA Amendment No: Two (2)	Procurement Officer: Nathaniel Thomas

Exhibit A – 2 CFR 200.332

[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 excluded or disqualified. These checks can be performed in SAM.Gov. ADHS Procurement does these checks and uploads the results into APP or Euna Solutions (eCivis).

[§ 180.300](#)

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

Arizona Department of Health Services

Subrecipient's unique entity identifier (UEI #):

QMWUG1AMYP65

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

H79TI087838

Federal Award Date

Contract Date 09/24/2024

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

09/30/2024 - 09/29/2025

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

09/30/2024 - 09/29/2025

Amount of Federal Funds Obligated in the subaward:

\$1,860,649

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):

\$401,024

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

Overdose Fatality Reviews and Case Management

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

Substance Abuse & Mental Health Services Administration (SAMHSA)

	INTERGOVERNMENTAL AGREEMENT (IGA)		ARIZONA DEPARTMENT OF HEALTH SERVICES OFFICE OF PROCUREMENT 150 N. 18 th Ave., Suite 530 Phoenix, Arizona 85007
	Amendment		
	Contract No.: CTR063749	IGA Amendment No: Two (2)	Procurement Officer: Nathaniel Thomas

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).	93.788
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%