

COB - BOSAIR FORM

09/12/2025 11:51 AM (MST)

Submitted by Christina.Drennan2@pima.gov



BOARD OF SUPERVISORS AGENDA ITEM REPORT (BOSAIR)

All fields are required. Enter N/A if not applicable. For number fields, enter 0 if not applicable.

Record Number:

Amplifund Grant Record Number: 70319

Award Type: Grant

Is a Board Meeting Date Requested? Yes

Requested Board Meeting Date: 10/14/2025

Signature Only:

NO

Procurement Director Award / Delegated Award: • N/A

Supplier / Customer / Grantor / Subrecipient: Arizona Department of Health Services

Project Title / Description: Arizona's Prescription Drug Overdose Prevention Program

Purpose: Amendment number three adds \$16,990.01 in funding to Fiscal Year 2025. 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: Grant: Not applicable

Procurement Method Additional Info: N/A

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 and Impact: This grant aims to benefit the public through the reduction of rates of drug use and

drug overdose in Pima County.

Budget Pillar

- Improve the quality of life

Support of Prosperity Initiative:

2. Improve Quality of Life and Opportunity in High Poverty Areas

Provide information that explains how this activity supports the selected Prosperity Initiative

1. Ensures access to Narcan and education in substance use overdose protection.
2. Facilitates the review of mortality causes to identify opportunities for prevention.

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

Retroactive Description:

Yes, this agreement is retroactive. The Pima County Health Department received this amendment on September 4, 2025. At that point, October 14, 2025, was the soonest Board meeting that was available for scheduling. If not approved, critical activities to combat the community overdose crisis will be negatively impacted.

Grant / Amendment Information (for grants acceptance and awards)

Record Number:

Amplifund Grant Record Number: 70319

Type: Amendment

Department Code: HD

AmpliFund Grant Record Number: 70319

Amendment Number: 03

Commencement Date: 09/30/2022

Termination Date: 09/29/2027

Advantage Initial GTAW# (If Applicable): N/A

Total Revenue Amount:

\$418,015.00

Total Match Amount

\$0.00

Advantage Grant ID # (If Applicable): N/A

All Funding Source(s) required: Substance Abuse and Mental Health Services Administration passed through Arizona Department of Health Services

Does PCAO need to review the grant award (or grant amendment)?

YES

Does PCAO need to sign the grant award (or grant amendment)?

YES

Match funding from General Fund?

NO

Match funding from other sources?

NO

Are Federal Funds Involved?

YES

If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)? Substance Abuse and Mental Health Services Administration passed through Arizona Department of Health Services

CFDA# 93.788

FAIN# H79TI085739

Department: Health

Name:
Christina Drennan

Telephone: 5207247614

6/11/2015 signature to BVA 9/24/2025

Department Director Signature: _____

Date: 9/22/20

Deputy County Administrator Signature: _____

Date: 9-25-2025

County Administrator Signature: _____

Date: 9/25/2025



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: **Three (3)**

Procurement Officer:
Karla Varela

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. FY25 Price Sheet is revised and replaced due to receiving additional funding in FY25.
 - 1.2. Exhibit A, 2 CFR is revised and replaced to reflect the funding increase in FY25.

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

Signature

Date

Jonathan Pinkney
9/12/25

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 _____ 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

Assistant Attorney General

Print Name

REVIEWED BY:

Appointing Authority or Designee
Pima County Health Department

	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: Three (3)	Procurement Officer: Karla Varela

REVISED PRICE SHEET

09/30/2024-09/29/2025

Pima County Health Department State Opioid Response (SOR) Cost Reimbursement Price Sheet	
Account Classification	Total Budget
Personnel*	\$78,096.74
ERE*	\$27,333.86
Professional & Outside Services (Indirect applied to \$25,000.00) *	\$289,774.40
Travel*	\$1,800.00
Occupancy*	\$0.00
Other Operating*	\$1,023.00
Indirect (15%*)	\$19,987.00
TOTAL (ANNUAL NOT TO EXCEED)	\$418,015.00

*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: Three (3)	Procurement Officer: Karla Varela

Exhibit A – 2 CFR 200.332

eCFR eExhibit -§ 200.332

Prime Awardee: Arizona Department of Health Services
UEI# QMWUG1AMYP65

Requirements for pass-through entities.

Per §180.300 the awarding agency must check that each subrecipient is not exclude nor 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):	<u>Arizona Department of Health Services</u>
Subrecipient's unique entity identifier (UEI #)	<u>QMWUG1AMYP65</u>
Federal Award Identification Number (FAIN, Sometimes it's the same as the Grant Number):	<u>H79TI085739</u>
Federal Award Date:	<u>09/24/2024</u>
Subaward Period of Performance Start and End Date;	<u>09/30/2024-09/29/2025</u>
Subaward Budget Period Start and End Date:	<u>09/30/2024-09/29/2025</u>
Amount of Federal Funds Obligated in the subaward:	<u>\$2,531,438.00</u>
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):	<u>\$418,015.00</u>
Federal award project description, as required to be responsive to the Federal Funding Accountability and Transparency Act (FFATA)	<u>Overdose Fatality Reviews and Case Management</u>
Name of Federal awarding agency, pass-through entity, and contact information for awarding official of the Pass-through entity	<u>Substance Abuse & Mental Health Services Administration (SAMHSA)</u>
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	<u>93.788</u>
Identification of whether the award is R&D	<u>No</u>
Indirect cost rate for the Federal award (including if the de minimis rate is charged) per § 200.414	<u>15%</u>