

# COB - BOSAIR FORM

01/23/2026 1:27 PM (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: PO HD PO2500037576

**Award Type:** Contract

**Is a Board Meeting Date Requested?** Yes

**Requested Board Meeting Date:** 02/17/2026

**Signature Only:**

NO

**Procurement Director Award / Delegated Award:** • N/A

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

**Project Title / Description:** Expansion of Behavioral Risk Factor Surveillance System (BRFSS) in Pima County

**Purpose:** The Centers for Disease Control and Prevention's Behavioral Risk Factor Surveillance System (BRFSS) survey is the mechanism by which Federal, State, and local health entities collect data to inform public health action. This intergovernmental agreement (IGA) amendment will allow for the purchase of one additional question, related to firearm safety, in the 2026 BRFSS survey.

**Procurement Method:** IGAs: This IGA is a non Procurement contract and not subject to Procurement rules.

**Procurement Method Additional Info:** N/A

**Program Goals/Predicted Outcomes:** Having local data on health behavior allows the community to understand disease risk in the County and informs the work of the Pima County Health Department. Additional anonymous data allows for better analysis of health risks and outcomes for different populations within the County.

**Public Benefit and Impact:** Local data are critical for targeted programs and interventions within sub-regions in the County (i.e. rural vs. urban, jurisdiction specific, zip codes).

**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** The BRFSS survey allows for improved area estimates of health behaviors, preventative health practices, risk factors, injuries, and preventable

TO: COB, 2/2/26 (1)

VERSION: 0

PAGES: 2

**selected Prosperity Initiatives**

chronic/infectious diseases in Pima County.

**Metrics Available to Measure Performance:**

The number of surveys distributed and quantity and quality of information collected will be used to measure performance.

**Retroactive:**

NO

**Amendment / Revised Award Information**

Record Number: PO HD PO2500037576

**Document Type:** PO**Department Code:** HD**Contract Number:** PO2500037576**Amendment Number:** 01**Commencement Date:** 02/17/2026**Termination Date:** 03/06/2028**Is the Termination Date new?**

NO

**Classification:** Expense**Adjust Level:** Increase**Prior Contract Number (If Applicable):** CT-HD-23-303-00

Amount This Amendment:

\$11,500.00

**Funding Source(s) required:** Health Special Revenue Fund, 2002**Funding from General Fund?**

NO

**Contract is fully or partially funded with Federal Funds?**

NO

**Department:** Health**Name:** Christina Drennan

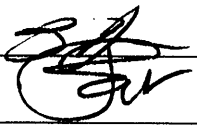
Telephone:

5207247614

Add GMI Department Signatures

No

Department Director Signature:  Date: 1/26/26

Deputy County Administrator Signature:  Date: 1-27-2026

County Administrator Signature: \_\_\_\_\_ Date: 1/27/2026

**Pima County Department of Health****Project:** Expansion of Behavioral Risk Factor Surveillance System (BRFSS) in Pima County**In Collaboration With:** Arizona Department of Health Services**Amount:** \$89,315.00**Agreement No.:** PO2500037576 (Formerly CT-HD-23-303-00)**Funding:** Health Special Revenue Fund, 2002**Agreement Amendment No.:** 01

|                                                     |                                 |             |
|-----------------------------------------------------|---------------------------------|-------------|
| <b>Orig. Contract Term:</b> 03/07/2023 – 03/06/2028 | <b>Orig. Amount:</b>            | \$77,815.00 |
| <b>Termination Date Prior Amendment:</b> N/A        | <b>Prior Amendments Amount:</b> | N/A         |
| <b>Termination Date This Amendment:</b> 03/06/2028  | <b>This Amendment Amount:</b>   | \$11,500.00 |
|                                                     | <b>Revised Total Amount:</b>    | \$89,315.00 |

**INTERGOVERNMENTAL AGREEMENT AMENDMENT**

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

**1. Background and Purpose.**

1.1. Background. On March 7, 2023, Pima County, a body politic and corporate of the State of Arizona ("County"), and the Arizona Department of Health Services ("ADHS") entered into the above referenced agreement to cooperatively collect and share certain public health data to facilitate Pima County's performance of its public health responsibilities

1.1. Purpose. The Parties agree to add \$11,500.00 for one additional question to the Behavioral Risk Factor Surveillance System (BRFSS) survey.

2. **Maximum Payment Amount.** The maximum amount the County will spend under this Contract, as set forth in Section 4, is increased by \$11,500.00. County's total payments to Contractor under this contract, including any sales taxes, will not exceed \$89,315.00.

3. **Scope of Services.** For the 2026 BRFSS survey year, one additional question related to firearm safety will be added to the Scope of Services, as set forth in Section 3.

**THE REMAINDER OF THIS PAGE IS INTENTIONALLY LEFT BLANK**

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

**ATTEST**

\_\_\_\_\_  
Clerk of the Board

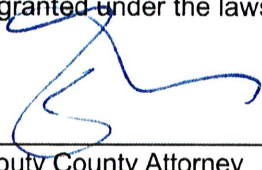
\_\_\_\_\_  
Date

**APPROVED AS TO CONTENT**

\_\_\_\_\_  
Department Representative

1/26/26  
Date

Pursuant to A.R.S. §11-952(D), the attorney for Pima County has determined that the foregoing Agreement is in proper form and is within the powers and authority of the entity as granted under the laws of the State.

  
\_\_\_\_\_  
Deputy County Attorney  
**Jonathan Pinkney**

Print DCA Name

1/21/26  
Date

**ADHS**

**Gina Corwin**

Digitally signed by Gina Corwin  
Date: 2025.12.30 10:49:14 -07'00'

\_\_\_\_\_  
Authorized Officer Signature

Gina Corwin, Chief Procurement Officer  
Printed Name and Title

12/30/2025  
Date

Pursuant to A.R.S. §11-952(D), the attorney for the Arizona Department of Health Services has determined that the foregoing Agreement is in proper form and is within the powers and authority of the entity as granted under the laws of the State

**Alice Perep**  
Assistant Attorney General  
\_\_\_\_\_  
Digitally signed by Alice Perep  
DN: cn=Alice  
o=Arizona Attorney General's Office,  
email=Alice.Perep@azag.gov, c=US  
Date: 2026.01.07 16:27:11 -07'00'

\_\_\_\_\_  
Date