

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

Award Contract Grant

Requested Board Meeting Date: May 6, 2025

or Procurement Director Award:

\* = Mandatory, information must be provided

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

Arizona Department of Health Services (ADHS)

\*Project Title/Description:

Cavity Free AZ Preventive Dental Services Pima County

#### \*Purpose:

Amendment #1 states that consultation shall be provided by a licensed dental/ dental hygiene graduate with a degree and experienced in public health. Clarifying language was added to the Price Sheet in the Service Description and reimbursement for authorized training was added.

The purpose of this grant is to reduce dental decay among children using a school-based strategy. This Dental Sealant IGA enables PCHD to provide dental sealants and fluoride treatments to children in Pima County schools where 50% or more of the children qualify for the free and reduced school meal program. As part of this initiative, all eligible children (with parental consent) who are in kindergarten, second or sixth grade receive a dental screening, dental sealants, and fluoride treatment as needed. This funding covers both under- and uninsured children enrolled in eligible and participating schools.

## \*Procurement Method:

This grant contract is a non-Procurement contract and not subject to Procurement rules. The grant contract was reviewed and signed by PCAO.

## \*Program Goals/Predicted Outcomes:

The objectives of this program include:

- Reduce dental decay in primary and permanent teeth in children;
- Provide dental sealants and fluoride applications to children at moderate to high risk;
- Monitor the oral health status of children;
- Assist families in obtaining dental care for their child(ren);
- Provide educational training for children, teachers, parents, and health professionals; and
- -Deliver oral health consultation by a Subject Matter Expert.

## \*Public Benefit:

This program addresses oral health disparities in under-served populations. Findings from scientific studies show that dental sealant programs prevent tooth decay and also stop cavities from developing. Services specified by the Dental Sealant IGA are provided in Amphitheater, Flowing Wells, Marana, Tucson and Sunnyside Unified School Districts. Without funding, the Health Department would not have the capacity to provide dental sealant, fluoride, or Silver Diamine Fluoride (SDF) treatments and many more under insured and uninsured children would have limited access to preventive dental health services.

## \*Metrics Available to Measure Performance:

- Number of dental screenings and sealant placement for children in 2nd or 6th grade
- Number of dental screenings and fluoride applications for children in kindergarten
- Number of children receiving SDF treatments

## \*Retroactive:

Yes. Upon initial review of the proposed amendment, a few areas required changes. Section #6 on funding was added to clarify the different funding streams in this grant. If not approved, the Health Department will be lacking significant funding for our oral health program.

Gril approve 1650 for KK Kelly 4/11/2025

••	BELOW MUST BE COMPLETED dicate "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? C'Yes C'No If Yes \$	%
Contract is fully or partially funded with Federal Funds? くうううううううううううううううううううううううううううううううううううう	No
Were insurance or indemnity clauses modified? C Yes C If Yes, attach Risk's approval.	No
Vendor is using a Social Security Number? C Yes C If Yes, attach the required form per Administrative Procedure 22-10.	- No
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):
s there revenue included? <sup>CYes</sup> No If Yes \$ *Funding Source(s) required: Funding from General Fund? <u>CYes</u> No If Yes \$	%
Grant/Amendment Information (for grants acceptance and awards)	C Award 🔄 Amendment
Document Type: <u>Grant amendment</u> Department Code: <u>HD</u>	Grant Number (i.e., 15-123): <u>69946</u>
Commencement Date: 09/01/2024 Termination Date: 08	· · · · -
	evenue Amount: \$ <u>129,998.00</u>
All Funding Source(s) required: Maternal and Child Health Services	Block Grant to the States
Department of Health and Human Services / Human Resources an	
Match funding from General Fund? CYes If Yes \$	%
Match funding from other sources? <sup>(*</sup> Yes (* No If Yes \$ *Funding Source:	%
If Federal funds are received, is funding coming directly from the Formation Arizona Department of Health Services	ederal government or passed through other organization(s)?
Contact: Sharon Grant	
Department: Health	Telephone: <u>724-7842</u>
Department: <u>Health</u> partment Director Signature:	Telephone: $\frac{724-7842}{1}$ Date: $H - 11 - 25$

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	INTERGOVERNMENTAL AGREEMENT (IGA Amendment		EMENT (IGA)	ARIZONA DEPARTMENT OF HEALTH SERVICES OFFICE OF PROCUREMENT 150 N. 18 <sup>th</sup> Ave., Suite 530 Phoenix, Arizona 85007
	Contract No.: CTR068229	IGA Am	endment No: 1	Procurement Officer: Roy Vasel
	CAVITY FREE AZ PREV	ENTIVE DENTAL	SERVICES PIMA CO	DUNTY
It is mutually agr	eed that the Intergovernmental	Agreement refere	nced is amended as fo	bliows:
hereby revised	erms and Conditions, Provision S d with the following:		nges, subsection 6.1 A	mendments, the Contract is
	be of Work is revised and replaced Sheet is revised and replaced.	d.		
	A & B - 2 CFR 200.322 are revise	ed and replaced.		
	ALL CHAN	IGES ARE REFLEC	CTED IN RED	
	All other provision	ns of this agreement	remain unchanged.	
Pima County Health	h Department			
Contractor Name:			County A	uthorized Signature
3950 S. Country Clu	ub, Suite 100			Rex Scott
Address:		1000		Print Name
Tucson	AZ	85714		
City	State	Zip		tle and Date
determined that this In	1-952, the undersigned public agency a tergovernmental Agreement is in proprity granted under the laws of Arizona $\frac{\sqrt{4/8}}{22}$	er form and is within	cautioned not to commen material, service or constr	Agreement Amendment shall be ed. The Public Agency is hereby ce any billable work or provide any 'uction under this IGA until the IGA authorized ADHS signatory.
Signature	Date		Signed this	day of 2024.
Jonathan P	inkney			
Print Name			Procurement Officer	
who has determined th	229, which is an Agreement between punt to A.R.S. § 11-952 by the undersignen tat it is in proper form and is within the pr the laws of the State of Arizona.	d Assistant Attomout		
Signature	Date			
	Assistant Attorney Ge	neral	REVIEWED BY:	Jelt
Print Name			Appointing Authority of Pima County Health De	partment



## SCOPE OF WORK

## 1. Background

- 1.1. The mission of the Arizona Department of Health Services (ADHS) Office of Oral Health (OOH) is to promote oral health for the well-being of all Arizona residents. The National Institutes of Health identified dental caries (tooth decay) as one of the most common childhood chronic diseases. The December 2021 NIH Oral Health in America report indicates that fluoridated water, toothpastes, and varnish, as well as dental sealants, can work together to dramatically reduce the incidence of caries.
- 1.2. Children who are at greatest risk for caries are those from low-income and minority populations and are least likely to have access to dental care. The American Academy of Pediatric Dentistry and the American Dental Association recommends the first dental visit occur no later than twelve (12) months of age. Children can experience tooth decay even before their first (1<sup>st</sup>) birthday, which can cause pain and affect their ability to eat, speak, sleep, and learn properly. Children do not lose all their baby teeth until they are adolescent age. Of the tooth decay found in children's teeth, approximately ninety percent (90%) occurs in tooth surfaces with pits and fissures, and almost two-thirds (2/3) are found in the chewing surfaces alone. Tooth decay can often be reversible or arrested in the earliest stages through a variety of proven preventive methods. Once the decay progresses and the longer the decay remains untreated, it becomes more difficult and costlier to repair. Therefore, early intervention and prevention are less expensive and more successful than treatment at a later time.
- 1.3. Health education and promotion can be an important piece of any public health initiative because many lowincome people do not understand the importance of seeking care or preventive services. The knowledge that tooth decay is a transmissible disease caused by bacteria or that simple behavior changes can limit the risk of decay is not widespread among the general population, let alone low-income families. According to the National Institute of Dental and Craniofacial Research, National Institutes of Health (NIDCR-NIH), fewer than one-quarter (1/4) of United States (US) adults know that dental sealants prevent dental decay. Collaborative efforts with agencies or groups can play a significant role in improving the education and awareness of community members.
- 1.4. National objectives help guide states in promoting health and wellness through such guidelines as the Healthy People 2030 oral health objectives. These include references to Oral Conditions – General, Adolescents, Health Care Access and Quality, Nutrition and Healthy Eating, and Preventive Care:

#### 1.4.1. Oral Conditions

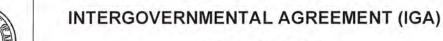
- 1.4.1.1. OH-1: Reduce the proportion of children and adolescents with lifetime tooth decay.
- 1.4.1.2. <u>OH-2</u>: Reduce the proportion of children and adolescents with active and untreated tooth decay.
- 1.4.1.3. OH-8: Increase use of the oral health care system. (Leading Health Indicator (LHI)).
- 1.4.1.4. OH-9: Increase the proportion of low-income youth who have a preventive dental visit.
- 1.4.1.5. <u>OH-10</u>: Increase the proportion of children and adolescents who have dental sealants on 1 (one) or more molars.
- 1.4.1.6. <u>AHS-05</u>: Reduce the proportion of people who can't get the dental care they need when they need it.

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- 1.5. Prevention services provided through collaboration with the OOH can help address some, if not all, of the above-mentioned oral health objectives. Some services may include, but are not limited to, implementation of a dental sealant program, fluoride varnish program, or an early childhood oral health program.
- 1.6. The CAVITY FREE AZ Sealant Program is a school-based preventive dental services program targeting schools with greater than fifty (50%) of children participating in the free and reduced school meal program. Second (2<sup>nd</sup>) and sixth (6<sup>th</sup>) grade children without private dental insurance are eligible to participate. Children in other grades may receive services upon determination by OOH. Children shall have parental consent and a clinical need for sealants. Preventive dental services are provided by OOH-trained licensed dental providers. Every effort is made to ensure that participating children receive information and referral to establish a dental home in or near their community.
- 1.7. Pit and fissure sealants are resin coatings applied to susceptible tooth surfaces, are an evidence-based preventive service, and have been approved and recommended for use for many years by professional health associations and public health agencies. The purpose of sealants is to prevent the growth of bacteria present in the pits and fissures of molar teeth, which can lead to the breakdown of tooth structure, resulting in decay. When properly placed, dental sealants can prevent up to Seventy percent (70%) of tooth decay on the chewing surfaces of permanent molar teeth. OOH training requires providers to use specified guidelines to ensure successful sealant retention.
- 1.8. Fluoride varnish application is a safe, cost-effective procedure to prevent tooth decay. Bacteria that build up on tooth surfaces produce acids that de-mineralize enamel. Left unchecked, the bacteria continue to destroy tooth structure. Fluoride varnishes are applied directly to the tooth surface and provide immediate "remineralization," interfere with bacterial build-up, and reduce acid production. The Association of State and Territorial Dental Directors (ASTDD) Fluoride Varnish Policy (Adopted 2010, Updated 2015) "supports the judicious use of fluoride varnish beginning with primary tooth eruption as an effective adjunct in programs designed to reduce lifetime dental caries experience." Children may receive fluoride varnish application after sealant application as part of the school-based dental sealant program, if authorized by OOH.
- 1.9. Silver Diamine Fluoride (SDF) is a colorless liquid containing silver, fluoride, and ammonia. In clinical trials, SDF was more effective than fluoride varnish or other fluoride agents at halting the caries process and at arresting decay when applied directly to cavitated lesions. Several clinical trials revealed that SDF is a safe, efficient, and effective method of controlling caries. SDF is an agent that prevents cavitated lesions from further progressing into the dentin of a tooth. It is recommended for use in people who are unable to access dental treatment or tolerate conventional dental care. SDF, included in the Arizona school-based sealant program, is a great alternative for preventing tooth decay in children residing in low-income communities, especially those who lack access to dental care. SDF has been proven to be effective at not only arresting active decay, but also at reducing the risk of cavities in the permanent first molars of children. Children participating in the school-based sealant program will benefit greatly from having access to this innovative approach to treating and preventing tooth decay.
- 1.10.Community health assessments are included in the core set of population-based elements outlined in the ten (10) essential Public Health services. Periodic health assessments are conducted by OOH to determine the oral health status of Arizona's children and to report and monitor Healthy People 2030 Objectives. Numerous screeners are needed to participate in data collection which follow strict calibration set on national standards. Calibration training shall be provided by OOH for each type of health assessment. Click on link below to see the ten (10) Essential Public Health Services.

## 1.10.1. The Ten (10) Essential Public Health Services

1.11.OOH uses a community-based approach and will target children at higher risk for dental caries, operate efficiently, ensure quality, and maximize the use of public funding to meet these objectives.



# Amendment

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## 2. Objective:

- 2.1. Reduce dental decay in primary and permanent teeth in children.
- 2.2. Provide preventive dental services to at-risk children.
- 2.3. Monitor oral health status of children.
- 2.4. Assist families in obtaining dental care for children.
- 2.5. Provide educational training for children, teachers, families, health professionals.
- 2.6. Provide technical assistance on dental public health issues.
- 2.7. Provide consultation to OOH, as requested.

## 3. Scope of Service:

3.1. The Contractor shall provide the services necessary to promote oral health and provide OOH-authorized preventive dental services. Provision of each type of preventive service will be based on availability of funding and at the discretion of OOH. Services shall include those necessary to coordinate and implement the CAVITY FREE AZ preventive dental services programs. At the request of the OOH, the Contractor shall provide services necessary to gather data for dental surveys following strict calibration in accordance with training provided by the OOH.

## 4. Tasks:

- 4.1. Coordination/Administration
  - 4.1.1. Distribute, collect, and analyze annual school applications for CAVITY FREE AZ Preventive Services Program in accordance with Arizona School-based Sealant Program Provider Manual guidelines.
  - 4.1.2. Coordinate preventive dental services with OOH-identified school and community sites.
  - 4.1.3. Procure and manage dental supply inventory in compliance with OOH requirements.
  - 4.1.4. Monitor equipment, maintain an inventory list, provide maintenance, and perform basic repairs.
  - 4.1.5. Ensure instrument sterilization according to current CDC oral health infection control guidelines. (see guidelines on this link) Infection Prevention & Control Guidelines & Recommendations.
  - 4.1.6. Provide administrative procedures, including, but not limited to.
    - 4.1.6.1. Planning as related to dental disease prevention programs.
    - 4.1.6.2. Maintaining program schedules.
    - 4.1.6.3. Conducting program outreach to include program promotion and oral health education (both on-site and virtual).
    - 4.1.6.4. Maintaining inventories of supplies and equipment.
    - 4.1.6.5. Preparing and submitting accurate and complete records of program activities.

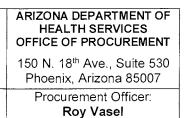
# INTERGOVERNMENTAL AGREEMENT (IGA) ARIZONA DEPARTMENT<br/>OF HEALTH SERVICES<br/>OFFICE OF<br/>PROCUREMENT Amendment 150 N. 18th Ave., Suite 530<br/>Phoenix, Arizona 85007 Contract No.: CTR068229 IGA Amendment No: 1

4.1.6.6. Preparing and submitting accurate and complete forms and reports required by OOH.

- 4.1.7. Notify ADHS in writing within thirty (30) days of any change in oral health program personnel.
- 4.1.8. Develop, solicit, and maintain program provider contracts and provide a copy of each contract to OOH.
- 4.1.9. Maintain a current Provider List to include name, address, phone number, and license number (if applicable) of each provider, and submit to OOH thirty (30) days prior to beginning the program each school year and within thirty (30) days of any provider change.
- 4.1.10. Maintain files containing the following information for each provider and staff member:
  - 4.1.10.1. Arizona current licenses and/or certificates issued by the Arizona Board of Dental Examiners.
  - 4.1.10.2. Resumes or curriculum vitae.
  - 4.1.10.3. Copy of the Standing Order for each associated provider.
  - 4.1.10.4. Current CPR certificate.
  - 4.1.10.5. Copy of fingerprint clearance.
  - 4.1.10.6. Malpractice insurance, including, but not limited to, sexual molestation and abuse coverage.
  - 4.1.10.7. Copy of Arizona Driver's License.
  - 4.1.10.8. Signed confidentiality agreement from all providers in the CAViTY FREE AZ program, including program coordinators, to comply with Health Insurance Portability and Accountability Act (HIPAA).
  - 4.1.10.9. Date and verification of most recent in-service training for all individuals providing service in the preventive dental program.
  - 4.1.10.10. Other insurance and documentation as needed.
  - 4.1.10.11. Storage of the above-mentioned documents (must follow HIPAA compliance and be available for audit by ADHS Sealant Program Manager or designated person).
  - 4.1.10.12. Coordinated collection of all information required by Arizona Health Care Cost Containment System (AHCCCS) and AHCCCS health plans for enrollment of dentists, dental therapists, and/or affiliated practice dental hygienists. This AHCCCS Provider Information shall be submitted to OOH 30 days prior to a dentist, dental therapist, and/or affiliated practice dental hygienist providing service in the CAVITY FREE AZ program. The information shall include the following:
    - 4.1.10.12.1. State of Arizona Substitute W-9 & Vendor Authorization form.
    - 4.1.10.12.2. Completed AHCCCS Provider Registration form.
    - 4.1.10.12.3. Completed AHCCCS Provider Participation agreement.



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- 4.1.10.12.4. Completed AHCCCS Group Authorization form.
- 4.1.10.12.5. Copy of Drug Enforcement Administration (DEA) Card.
- 4.1.10.12.6. Social Security number.
- 4.1.11. Coordinate training for preventive dental program providers, at a minimum annually. Assure that all employed and contracted preventive dental program providers complete any ADHS required training prior to providing services and receive annual training on program updates and reviews. Reimbursement to the program provider for attending training is the responsibility of the Contractor and should be considered part of the unit price.
- 4.1.12. Prepare and submit OOH preventive dental program data forms as contained in the CAViTY FREE AZ Provider Training Manual after completion of services at each school or community site which may include school application forms, completed preventive dental program consent/health history forms, encounter forms using standard protocols, and completed summary forms:
  - 4.1.12.1. Assure accurate data collection and reporting, using standard guidelines as stated in the CAVITY FREE AZ Provider Training Manual.
  - 4.1.12.2. Correct and return forms deemed unacceptable by OOH, within ten (10) calendar days of receipt by the Contractor.
  - 4.1.12.3. Prepare and submit an Annual Activity Plan to OOH that includes:
    - 4.1.12.3.1. A list of schools and/or community sites to be scheduled for preventive dental services.
    - 4.1.12.3.2. A schedule of any in-service trainings and/or scheduled quality assurance checks.
  - 4.1.12.4. Prepare and submit a Monthly Activity Report to include:
    - 4.1.12.4.1. The number of children by site who received preventive dental services in the previous month, outlining which type of service was received.
    - 4.1.12.4.2. Quality Assurance activities, including a training attendance list.
  - 4.1.12.5. Prepare and submit a monthly Contractor's Expenditure Report (CER) and supporting documents, provided by OOH, to be signed by the Chief of the Office of Oral Health or designee before submitting to ADHS Accounting Office for payment. Payment shall be made in monthly payments based on the IGA Price Sheet and the current Purchase Order. A month shall be defined as a calendar month, e.g. March 1<sup>st</sup> March 31<sup>st</sup>.
    - 4.1.12.5.1. Performance Benchmarks from CAViTY FREE AZ Sealant Program Provider Training Manual (most current version).
    - 4.1.12.5.2. Infection control, OSHA-compliant.
    - 4.1.12.5.3. QA monitoring forms, e.g., observation of program implementation.
    - 4.1.12.5.4. Increasing school participation rates.
    - 4.1.12.5.5. Schedule of QA checks and equipment maintenance.

# INTERGOVERNMENTAL AGREEMENT (IGA)

# Amendment

ARIZONA DEPARTMENT OF HEALTH SERVICES OFFICE OF PROCUREMENT

12		Contract No	o.: CTR068229	IGA Amendment No: 1	Procurement Officer: Roy Vasel
			4.1.12.5.6. Equ	ipment Maintenance log.	
			4.1.12.5.7. Prot	tocol to be followed if acceptable performance	measures are not being met.
			4.1.12.5.8. Trai	ning agenda.	
			4.1.12.5.9. Oth	er topics determined necessary by ADHS an	d/or the Contractor.
4.1.12.6. Prepare and submit an Annual Report to include:					
			4.1.12.6.1. Ider	tification of any barriers or recommendations	for achieving program goals.
				ummary of the progress made toward accom Quality Assurance Plan.	plishing the tasks set forth in
4.2.	Site /	Assistant(s) sl	hall:		
	4.2.1.Transport equipment and supplies.				
	4.2.2.Provide chair-side assistance.				
	4.2.3. Record dental findings as instructed by dentists and dental hygienists.				
	4.2.4.Adhere to infection control protocols.				
	4.2.5. Educate clients and families.				
	4.2.6. Distribute referral and health insurance information.				
4.3.	3. Public Health Hygienist(s) shall:				
	4.3.1.Follow current standing orders when applicable.				
	4.3.2. Transport equipment and supplies.				
	4.3.3.Collect oral health data using OOH standardized protocol.				
	4.3.4. Provide OOH-authorized dental prevention services.				
	4.3.5.Adherer to infection control protocols.				
	4.3.6	.Educate clie	nts and families.		
	4.3.7	.Distribute rel	ferral and health i	nsurance information.	
	4.3.8.Provide program consultation, as requested.				

- 4.3.9. Attend National Oral Health Conference annually as requested.
- 4.4. Dentist(s) shall:
  - 4.4.1. Serve as affiliated practice dentist, if applicable.



- 4.4.2. Transport equipment and supplies.
- 4.4.3. Collect oral health data using OOH standardized protocol.
- 4.4.4. Provide OOH authorized dental prevention services.
- 4.4.5. Adhere to CDC infection control protocols.
- 4.4.6. Educate clients and families.
- 4.4.7. Distribute referral and health insurance information.
- 4.4.8. Provide program consultation, as requested.
- 4.4.9. Maintain AHCCCS enrollment.
- 4.4.10. Provide standing orders for public health dental hygienists to apply sealants, fluoride varnish, and Silver Diamine Fluoride to children enrolled in the program.

## 5. REQUIREMENTS:

- 5.1. ADHS shall retain ownership of all data, forms, and supporting documentation for the program related activities.
- 5.2. Any required lists or reports may be submitted electronically.
- 5.3. Any correspondence including Protected Health Information (PHI) shall adhere to HIPAA security rules.
- 5.4. All PHI shall be submitted as originals and shall not be submitted electronically.
- 5.5. The Contractor shall:
  - 5.5.1. Follow current standing orders when applicable.
  - 5.5.2. Transport equipment and supplies.
  - 5.5.3.Collect oral health data using OOH standardized protocol.
  - 5.5.4. Provide OOH-authorized dental prevention services.
- 5.6. Obtain approval from OOH for any marketing, educational, and/or referral materials to be used in the program.
- 5.7. Adhere to the policies and procedures as set forth in the appropriate dental prevention program provider manual or protocol.
- 5.8. Utilize all preventive dental services program forms as provided by OOH. <u>No alterations shall be permitted without</u> <u>authorization from OOH Program Manager or designated person.</u>
- 5.9. Ensure correspondence with schools, parents, and/or partners (including, but not limited to, county governments, sub-recipients and other agencies) includes the following statement: "The CAVITY FREE AZ Preventive Dental Services Program is funded by the Arizona Department of Health Services, Office of Oral Health".

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- 5.10. Special Programmatic Requirements
  - 5.10.1. There shall be a minimum of twenty-five (25) children enrolled in second (2<sup>nd</sup>) and sixth (6<sup>th</sup>) grade to schedule the school for preventive dental services. Any services provided to schools with fewer than twenty-five (25) signed consents shall be approved by the Chief of the Office of Oral Health prior to providing services.
  - 5.10.2. Consultation shall be provided by an individual with a licensed dental/dental hygiene graduate degree and experienced in public health.

## 6. FUNDING

- 6.1. Funding for this grant will be paid from three (3) sources: Grants to States to Support Oral Health Workforce Activities (FAIN 5 T12HP46083-02-00), Maternal and Child Health Services (FAIN 1 B04MC52908-01-03), and State of Arizona funding from Oral Health Fund.
  - 6.1.1. State of Arizona funding will be used if necessitated by a federal funding disruption.
  - 6.1.2. The Contractor shall not have to repay any State funds to ADHS (if used) once federal funding becomes available. Federal award amounts may be reduced commensurate to amount of State funding used.
  - 6.1.3. State funding can be used for all allowable activities under FAINs 5 T12HP46083-02-00 and B04MC52908-01-03.
  - 6.1.4. State will clearly confirm funding source(s) used before the start of new sub budgeting periods on purchase order forms.

#### 7. STATE PROVIDED ITEMS:

- 7.1. OOH will provide:
  - 7.1.1.Provider Manual/Protocol for each provider as related to each prevention program in which the provider participates.
  - 7.1.2.Expenditure Report (CER).
  - 7.1.3.Master copies of forms, report templates, protocols, and policies required to be used in the specific prevention program.
  - 7.1.4.Portable dental equipment, unless provided by the Contractor. All portable equipment is to be returned, in working condition, to OOH upon termination of contract.
  - 7.1.5. Coordinator's School Promotion Training Manual.
  - 7.1.6. Cavity Free AZ Sealant Program Provider Training Manual, Public Health Model (most current update).
  - 7.1.7.Marketing materials for the CAViTY FREE AZ Sealant Program and/or other preventive dental services to qualified sites.
  - 7.1.8.List of eligible sites.
  - 7.1.9. List of randomly selected students for annual sealant retention checks.



# Amendment

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- 7.1.10. Sealant retention monitoring results.
- 7.1.11. Standardized training for program implementation and data collection.
- 7.1.12. Periodic technical assistance meetings for Contractors.
- 7.1.13. Random quality assurance checks, including site visits.
- 7.1.14. Assurance of dental provider linkage to appropriate health plans.

## 8. APPROVALS

8.1. The Chief of the Office of Oral Health or designated Program Manager shall have the final approval of all items submitted by the Contractor.

## 9. DELIVERABLES:

- 9.1. The Contractor shall submit:
  - 9.1.1.Provider List, due ten (10) days after CAViTY FREE AZ provider trainings.
  - 9.1.2.AHCCCS Provider Information, due thirty (30) days prior to a dentist/AP dental hygienist providing service in the CAVITY FREE AZ Program.
  - 9.1.3. Data Forms within ten (10) business days after completion of each school or community site.
  - 9.1.4. Monthly Activity Reports by the 10th business day of the following month to include:
    - 9.1.4.1. Health fairs attended.
    - 9.1.4.2. Community outreach activities.
    - 9.1.4.3. List of schools included on CER.
  - 9.1.5.Monthly Planning Reports by the twenty-fifth (25th) of each month for the upcoming month.
  - 9.1.6. Quality Assurance Plan along with Annual Report, due thirty (30) days after the end of each school year.
  - 9.1.7.Completed Expenditure Report (CER) with supporting documents due by the fifteenth (15th) of the month following the calendar month that the services were provided.
  - 9.1.8.Annual Report within thirty (30) days after the end of each Contract year.
  - 9.1.9. Copies of school applications to OOH within thirty (30) days of receipt.
  - 9.1.10. Log to OOH within thirty (30) days of a completed Waterline test.

## 10. NOTICES, CORRESPONDENCE, REPORTS, AND INVOICES

10.1. Notices, Correspondence, Reports and Invoices/CER's from the Contractor to ADHS shall be sent to:

Arizona Department of Health Services

# INTERGOVERNMENTAL AGREEMENT (IGA)

# Amendment

ARIZONA DEPARTMENT OF HEALTH SERVICES OFFICE OF PROCUREMENT

150 N. 18th Ave., Suite 530

Contract No.: CTR068229

IGA Amendment No: 1

Phoenix, Arizona 85007 Procurement Officer: Roy Vasel

Bureau of Women's and Children's Health (BWCH) Office of Oral Health 150 North 18<sup>®</sup> Avenue, Suite #320 Phoenix, Arizona 85007 Phone: (602) 364-1431 Email: Julia.wacloff@azdhs.gov

10.2. CERs shall be emailed to: invoices@azdhs.gov.

10.3. Notices, Correspondence, Reports and Payments from ADHS to the Contractor shall be sent to:

Pima County Health Department Attn: Theresa Cullen, MD, Director 3950 S. Country Club, Suite 100 Tucson, AZ 85714-2099 Phone: (520)724-7765 Email: <u>theresa.cullen@pima.gov</u>



# INTERGOVERNMENTAL AGREEMENT (IGA)

Amendment

Contract No.: CTR068229

IGA Amendment No: 1

Roy Vasel

# ORAL HEALTH DENTAL SEALANT SERVICES

PRICE SHEET

SERVICE DESCRIPTION	RATE	
Dental Sealant Services Total cost per sealant to include the following: Sealant dental staff and services including travel, supplies, training, indirect/direct costs. Administrative personnel coordination of Sealant program and participation in an External Advisory Group. Cost of Dentist providing standing orders for public health hygienist.	\$150.00 sealant applied per child	
Oral Health Screening for Sealant Program	\$12.00 per child	
Fluoride Varnish Services	\$10 per fluoride application	
Oral Health Data Collection/Outreach, Dental Hygienist	\$35 per hour per provider	
Oral Health Data Collection/Outreach, Dental Assistant	\$18 per hour per provider	
Silver Diamine Fluoride Services	\$50.00 per Child	
Oral Health Consultation	\$9,213 per month	
National Oral Health Conference	\$2,300 per year	
Authorized Training, Dental Hygienist	\$35 per hour per provider	
Authorized Training, Dental Assistant/Coordinator	\$18 per hour per provider	

Authorization for Provision of Services: Authorization for purchase of services under this Contract shall be made only upon ADHS issuance of a Purchase Order that is signed by an authorized agent. The Purchase Order will indicate the Contract number and the dollar amount of funds authorized. The Contractor shall only be authorized to perform services up to the amount of the Purchase Order. No further obligation shall exist on behalf of ADHS unless a) the Purchase Order is changed or modified with an official ADHS Procurement Change Order, and/or b) an additional Purchase Order is issued for purchase of services under this Contract.

INTERGOVERNMENTAL AGREEMENT (IGA) Amendment		ARIZONA DEPARTMENT OF HEALTH SERVICES OFFICE OF PROCUREMENT 150 N. 18 <sup>th</sup> Ave., Suite 530 Phoenix, Arizona 85007
Contract No.: CTR068229	IGA Amendment No: 1	Procurement Officer: Roy Vasel

#### § 200.332

Requirements for pass-through entities.

All pass-through entities must:

(a) Ensure that every subaward is clearly identified to the subrecipient as a subaward and includes the following information at the time of the subaward and if any of these data elements change, include the changes in subsequent subaward modification. When some of this information is not available, the pass-through entity must provide the best information available to describe the Federal award and subaward.

Prime Awardee: UEI #	Arizona Department of Health Services QMWUG1AMYF65
Federal Award Identification (Grant Number):	1 B04MC52908-01-03
Subrecipient name (which must match the name associated with its unique entity identifier):	PIMA COUNTY HEALTH DEPARTMENT
Subrecipient's unique entity identifier (UEI #):	U8XUY58VDQS3
Federal Award Identification Number (FAIN, sometimes it's the same as the Grant Number):	B0452908
Federal Award Date (see the definition of Federal award date in § 200.1 of this part) of award to the recipient by the Federal agency;	10/01/2024
Subaward Period of Performance Start and End Date;	10/01/2024- 09/30/2026
Subaward Budget Period Start and End Date:	10/01/2024- 09/30/2026
Amount of Federal Funds Obligated by this action by the pass-through entity to the subrecipient (this is normally the contract amount):	\$129,998.00
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):	n/a
Total Amount of the Federal Award committed to the subrecipient by the pass-through entity	\$129,998.00
Federal award project description, as required to be responsive to the Federal Funding Accountability and Transparency Act (FFATA)	Maternal and Child Health Services
Name of Federal awarding agency, pass-through entity, and contact information for awarding official of the Pass-through entity	Human Resources and Services Administration (HRSA)

	INTERGOVERNME	ENTAL AGREEMENT (IGA)	ARIZONA DEPARTMENT OF HEALTH SERVICES OFFICE OF PROCUREMENT	
	Amendment		150 N. 18 <sup>th</sup> Ave., Suite 530 Phoenix, Arizona 85007	
	Contract No.: CTR068229	IGA Amendment No: 1	Procurement Officer: Roy Vasel	
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		de		
disbursement:		93.994		
Identification of whether the award is R&D		No	- <u></u>	
Indirect cost rate for the Federal award (including if the de minimis rate is charged) per § 200.414		if		

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