

BOARD OF SUPERVISORS AGENDA ITEM REPORT CONTRACTS / AWARDS / GRANTS

OAward OContract OGrant

Requested Board Meeting Date: 12/21/2021

* = Mandatory, information must be provided

or Procurement Director Award

*Contractor/Vendor Name/Grantor (DBA): Maximus Health Services, Inc.

*Project Title/Description:

Contact Tracers

*Purpose:

Amendment of Award: Master Agreement No. MA-PO-20-226, Amendment No. 03. This Amendment exercises the renewal option to extend the termination date to 07/05/2022 and increases the not-to-exceed amount by \$8,000,000.00 for a cumulative not-to-exceed contract amount of \$23,000,000.00. Administering Department: Health.

*Procurement Method:

Pursuant to Pima County Procurement Code 11.12.060, Emergency and other limited competition procurement, on July 6, 2020, the Procurement Director approved an award of contract for an initial term of six (6) months and an award amount of \$10,000,000.00 with three (3) six month renewal options.

On December 15, 2020, the Board of Supervisors approved Amendment No. 01, which extended the termination date to July 5, 2021. No additional funding was added and contract not-to-exceed amount remained at \$10,000,000.00. Two (2) six month renewal options remained.

On April 6, 2021, the Board of Supervisors approved Amendment No. 02, which extended the termination date to January 5, 2022 and increased the not-to-exceed amount by \$5,000,000.00 for a cumulative not-to-exceed contract amount of \$15,000,000.00. One (1) six month renewal option remains.

PRCUID: 380780

Attachment: Contract Amendment No. 03.

*Program Goals/Predicted Outcomes:

Rapid and thorough tracing, symptom monitoring and education is essential to limit the spread of COVID-19. An effective and timely response following confirmation of a COVID-19 positive case will decrease the number of potential secondary and tertiary infections.

*Public Benefit:

Decreased spread of COVID-19 by informing and educating persons exposed to known positive COVID-19 cases. Successful implementation will enhance Pima County readiness for future outbreaks of COVID-19 or other communicable diseases or infections.

*Metrics Available to Measure Performance:

Pima County will assess contractor performance by an array of metrics including objective (e.g. case count, contacts reached, symptom monitoring contacts completed, et al) and subjective (professionalism, telephone manner, community contact evaluation) criteria.

*Retroactive:

No.

TO: COB 12002 Vers. 5 Pas.4 Revised 5/2020

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?	OYes ONo If Yes \$; 	%
Contract is fully or partially fund	led with Federal Funds?	🗌 Yes	□ No
If Yes, is the Contract to a ver	ndor or subrecipient?		
Were insurance or indemnity cla	auses modified?	🗌 Yes	□ No
lf Yes, attach Risk's approval.			
Vendor is using a Social Securi	ty Number?	🗌 Yes	□ No
If Yes, attach the required form per Administrative Procedure 22-10.			
······································			
Amendment / Revised Award			
Document Type: MA	Department Code: PO		Contract Number (i.e., 15-123): 20-226
Amendment No.: 03			ersion No.: 05
Commencement Date: 01/06/20)22		ermination Date: 07/05/2022
		Prior Co	ontract No. (Synergen/CMS):
Expense or ORevenue	●Increase ○Decrease	Amoun	t This Amendment: \$ 8,000,000.00
Is there revenue included?	OYes ●No If	Yes \$	
*Funding Source(s) required:	Health Department Ops		
Funding from General Fund?	OYes ⊙No If	Yes \$	%
Grant/Amendment Informatio	n (for grants acceptance and	d awards)	⊖ Award ⊖ Amendment
Document Type:	Department Code:		Grant Number (i.e.,15-123):
Commencement Date:	Termination Date:		Amendment Number:
			enue Amount: \$
*All Funding Source(s) requir			
An Funding bourbe(b) requi	<u> </u>		
*Match funding from General	Fund? OYes ONo If	Yes \$	%
*Match funding from other so *Funding Source:	ources? OYes ONo If	Yes \$ _	%
*If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?			
Contact: Procurement Officer			00° Division Manager. Ana Wilber Digitally signed by Ana Wilber Date: 2021.12.03 12:30:33
Department: Procurement Dir		Digitally signed Date: 2021.12.	by Terri Spencer 03 14:38:56 -07:00' Telephone: (520)724-7466
Department Director Signatur	e/Date: Donald L Gates	Diplatly signed by Donald L Gat Dis conDonald L Gat m. or Pirru signal-Donald Gates Printage Data 2028.3 are 15(12)(1-070)	લ માં આવે છે. આ ગામ આ આ ગામ આ ગ
Deputy County Administrator	Signature/Date:	-A	n 6Dec2021
County Administrator Signatu (Required for Board Agenda/Addendum		Ni	W 12/10/2021

Revised 5/2020

Pima County Department of Health

Project: Contact Tracers

Contractor: Maximus Health Services, Inc. 1891 Metro Centre Dr. Reston, VA 20190

Contract No.: MA-PO-20-226

Contract Amendment No.: 03

Orig. Contract Term: 07/06/2020 - 01/05/2021 Termination Date Prior Amendment: 01/05/2022 **Termination Date This Amendment:** 07/05/2022 Orig. Amount: \$10,000,000.00 Prior Amendments Amount: \$ 5,000,000.00 This Amendment Amount: **Revised Total Amount:**

\$ 8,000,000.00 \$23,000,000.00

CONTRACT AMENDMENT

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

1. Background and Purpose.

1.1. Background. On July 6, 2020, County and Contractor entered into the above referenced agreement to provide Contact Tracers.

1.2. Purpose. County requires continuing services, to limit the spread of COVID-19.

- 2. Term. The County is exercising the third extension option to renew the contract for one additional six month term commencing on January 6, 2022 and terminating on July 5, 2022. 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. Maximum Payment Amount. The maximum amount the County will spend under this Contract, as set forth in Section 5.2, is increased by \$8,000,000.00. County's total payments to Contractor under this contract, including any sales taxes, will not exceed \$23,000,000.00.

[The rest of this page intentionally left blank]

Contract No.: MA-PO-20-226

Chair, Board of Supervisors

Date

ATTEST

Clerk of the Board

Date

APPROVED AS TO FORM

Deputy County Attorney

Jonathan Pinkney Print DCA Name

C Date

Maximus Health Services, Inc.

Authorized Officer Signature

Kaila Iglehart - Director, Contracts

Printed Name and Title 11/24/2021

Date