



BOARD OF SUPERVISORS AGENDA ITEM REPORT
CONTRACTS / AWARDS / GRANTS

Requested Board Meeting Date: July 7, 2015

or Procurement Director Award ☐

Contractor/Vendor Name (DBA): Arizona Department of Health Services

Project Title/Description:

HIV Prevention Program

Purpose:

To implement high impact prevention strategies that are most cost-effective at reducing HIV infections. Strategies include HIV testing, condom distribution and programs to help people living with HIV avoid transmitting HIV to others.

This Amendment is solely to change the vendor ID number under which the IGA is registered in ProcureAZ. In order to move the IGA to the main Pima County Health Department vendor ID number, the IGA/Contract number must be changed.

Procurement Method:

N/A

Program Goals/Predicted Outcomes:

1. To provide access to quality HIV testing and Linkage to Care for persons residing in Pima County.
2. To increase the number of persons in the jurisdiction who are aware of their status.
3. To provide partner services to all persons newly diagnosed with HIV or previously positive with a new STD diagnosis.

Public Benefit:

Reduction of new HIV infections in Pima County.

Metrics Available to Measure Performance:

- Provide or offer partner services to 100% of newly diagnosed cases within 7 days of report
- Enter test data into web based system within 24 hours for positives and 7 days for negatives
- Create a work plan and condom distribution plan within 30 days of contract initiation
- Provide timely, client-centered prevention counseling and linkage to care to 100% of reported cases
- Report 100% of HIV and/or AIDS cases to ADHS

Retroactive:

No.

Original Information

Document Type: _____ Department Code: _____ Contract Number (i.e.,15-123): _____

Effective Date: _____ Termination Date: _____ Prior Contract Number (Synergen/CMS): _____

☐ Expense Amount: \$ _____ ☐ Revenue Amount: \$ _____

Funding Source(s): _____

Cost to Pima County General Fund: _____

Contract is fully or partially funded with Federal Funds? ☐ Yes ☐ No ☐ Not Applicable to Grant AwardsWere insurance or indemnity clauses modified? ☐ Yes ☐ No ☐ Not Applicable to Grant AwardsVendor is using a Social Security Number? ☐ Yes ☐ No ☐ Not Applicable to Grant Awards

If Yes, attach the required form per Administrative Procedure 22-73.

Amendment InformationDocument Type: GTAW Department Code: HD Contract Number (i.e.,15-123): 15*102Amendment No.: Two AMS Version No.: 1Effective Date: upon final signature New Termination Date: 6/30/2017 (no change)☐ Expense ☐ Revenue ☐ Increase ☐ Decrease Amount This Amendment: \$ N/AFunding Source(s): ADHS / federalCost to Pima County General Fund: \$0.00Contact: Sharon GrantDepartment: Health Telephone: 724-7842Department Director Signature/Date: Mary M. Thompson 6.19.15Deputy County Administrator Signature/Date: Sharon 6-23-15County Administrator Signature/Date: C. J. Duckert 6/23/15
(Required for Board Agenda/Addendum Items)

**INTERGOVERNMENTAL AGREEMENT (IGA) AMENDMENT**

**ARIZONA DEPARTMENT OF
HEALTH SERVICES**
1740 W. Adams, Room 303
Phoenix, Arizona 85007
(602) 542-1040
(602) 542-1741 Fax
Procurement Specialist
Manuel Gonzales

Contract No: ADHS13-031209

Amendment No. 2

HIV Prevention Program

It is mutually agreed that the Intergovernmental Agreement referenced is amended, effective date of final signature unless otherwise specified, as follows:

1. Pursuant to the Terms and Conditions of Contract ADHS13-031209 (old contract), Provision Six (6), Contract Changes, Item 6.1, Amendments, Purchase Orders and Change Orders, Contract ADHS13-031209 (Old contract) is hereby changed to ADHS15-096553 due to change to County official ProcureAZ vendor profile.

All other provisions of this agreement remain unchanged.

Pima County Health Department

Contractor Name
3950 South Country Club, #100

Address
Tucson Arizona 85701
City State Zip

CONTRACTOR SIGNATURE**Contractor Authorized Signature****Printed Name****Title****CONTRACTOR ATTORNEY SIGNATURE**

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 the State of Arizona.

Paula J. Perrera 6-18-15
Signature Date

Paula J. Perrera
Printed Name

Attorney General Contract No. P0012014000078, which is an Agreement between public agencies, has been reviewed pursuant to A.R.S. § 11-952 by the undersigned Assistant Attorney General, 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
Assistant Attorney General

Date**Printed Name:**

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** _____ **2015****Procurement Officer****REVIEWED BY:**

Manuel D. Gonzales
Appointing Authority or Designee
Pima County Health Department