



BOARD OF SUPERVISORS AGENDA ITEM REPORT
CONTRACTS / AWARDS / GRANTS

Requested Board Meeting Date: May 3, 2016

or Procurement Director Award ☐

Contractor/Vendor Name (DBA): Health Services Advisory Group (HSAG)

Project Title/Description:

Community diabetes prevention and management education

Purpose:

Offer and facilitate free evidence based, community diabetes prevention and management workshops that will educate participants on the disease, healthy eating, physical activity, medication monitoring, diabetes monitoring, and the physical symptom signs of diabetes.

Procurement Method:

N/A

Program Goals/Predicted Outcomes:

Improve diabetes and cardiac care, improve health literacy related to diabetes, aid in planning sustainability guidelines to reduce health disparities, and ultimately reduce diabetes prevalence in Pima County.

Public Benefit:

Free community based evidence-based educational workshops to prevent the onset of diabetes and help those who are already diagnosed manage the condition. In addition, workshops are designed to aid those who care for individuals suffering from diabetes.

Metrics Available to Measure Performance:

- Workshop completed with 10 or more participants fitting the following criteria;
 - Must be 65 years or older and/or indicate on the *Everyone with Diabetes Counts* (EDC) registration form that they have Medicare as their insurance.
 - Must indicate on the EDC registration form that they have either pre-diabetes, Type 1 diabetes, Type 2 diabetes, or "I don't know."
 - Must indicate on the attendance log that they completed four out of the six weekly Stanford Diabetes Self-Management Education (DSME) classes or five of six weekly *Everyone with Diabetes Counts* (DEEP) classes
- Required reporting documents submitted to HSAG

Retroactive:

No.

Original Information

Document Type: GTAW Department Code: HD Contract Number (i.e., 15-123): 16-65
Effective Date: upon sign Termination Date: three years Prior Contract Number (Synergen/CMS): N/A
☐ Expense Amount: \$ _____ ☒ Revenue Amount: \$ 11,250
Funding Source(s): Health Services Advisory Group (HSAG)

Cost to Pima County General Fund: \$0.00

Contract is fully or partially funded with Federal Funds? ☐ Yes ☐ No ☒ Not Applicable to Grant Awards

Were insurance or indemnity clauses modified? ☐ Yes ☐ No ☒ Not Applicable to Grant Awards

Vendor 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 Information

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

Amendment No.: _____ AMS Version No.: _____

Effective Date: _____ New Termination Date: _____

☐ Expense ☐ Revenue ☐ Increase ☐ Decrease Amount This Amendment: \$ _____

Funding Source(s): _____

Cost to Pima County General Fund: _____

Contact: Sharon Grant

Department: Health Telephone: 724-7842

Department Director Signature/Date: *[Signature]* 8 April 16

Deputy County Administrator Signature/Date: *[Signature]* 4-12-2016

County Administrator Signature/Date: *C. Duckert* 4/13/16
(Required for Board Agenda/Addendum Items)

**GRANT AGREEMENT
BETWEEN
THE HEALTH SERVICES ADVISORY GROUP, INC.
AND
THE PIMA COUNTY HEALTH DEPARTMENT**

Whereas, the Health Services Advisory Group, Inc. (HSAG) and Pima County, through the Pima County Health Department, (Contractor) both desire to have workshops available for Medicare clients with diabetes in order to improve their health literacy and enable them to self-manage their diabetes more effectively; and

Whereas, HSAG receives funding from the Centers for Medicare & Medicaid Services to implement workshops towards this goal through its "Everyone with Diabetes Counts" program; and

Whereas, HSAG lacks the staffing to provide these workshops in Spanish in Pima County and Contractor has trained, bilingual staff available for such workshops; and

Whereas, Contractor has the authority to enter into this Agreement pursuant to A.R.S. § 11-201; and

Whereas, the Board of Supervisors Policy D22.6, Policy for Administering Grants, and Administrative Procedure 22-4, Grants Management, authorize the Board of Supervisors to accept grant awards;

Now, therefore, the parties agree as follows:

1. TERM

This contract is effective upon execution and shall remain in effect for an initial term of three (3) years, with the possibility of an additional two (2) year extension or any portion thereof (for a maximum of five years) through an amendment executed by the parties, unless terminated by either party providing the other party 30 days written notice.

2. SCOPE OF SERVICES

Contractor agrees to provide workshops in Pima County, Arizona as requested by HSAG using evidence based programs such as Stanford Diabetes Self-Management Education (DSME) and/or the Diabetes Empowerment Education Program (DEEP) and upon the terms and conditions set forth herein. The parties estimate that there will be a minimum of two and a maximum of five workshops per 12-month period under this Agreement. Each workshop must train a minimum of ten (10) qualifying participants to bill for the workshop.

A qualifying participant must meet the following criteria:

- Must be 65 years or older and/or indicate on the *Everyone with Diabetes Counts* (EDC) registration form that they have Medicare as their insurance.
- Must indicate on the EDC registration form that they have either pre-diabetes, Type 1 diabetes, Type 2 diabetes, or "I don't know."
- Must indicate on the attendance log that they completed four out of the six weekly Stanford DSME classes or five out of the six weekly DEEP classes.

3. INDEPENDENT CONTRACTOR.

HSAG and Contractor agree that the relationship created by this Agreement is that of independent contractor. No employee of Contractor will be an employee of HSAG for federal tax purposes or any other purposes. Contractor staff acknowledges that they are not entitled to the benefits provided by HSAG to its employees.

4. COMPENSATION AND PAYMENT.

HSAG shall pay to Contractor, during the term of this Agreement, \$750.00 per Workshop rendered by Contractor. Contractor shall submit a completed Diabetes Self-Management Education Workshop Leader Invoice (see Attachment 1) and HSAG shall pay Contractor within 30 days of invoice submittal. Contractor's invoices shall be sent directly to Accounts Payable by mail or email. Mailed invoices should be sent to: HSAG, Attn. Accounts Payable, 3133 E. Camelback Road, Suite 100, Phoenix, AZ 85016. Invoices may also be sent as an attachment to accountspayable@hsag.com.

5. ENTIRE AGREEMENT

This Agreement sets forth the entire understanding between the parties hereto with respect to all matters referred to herein, and the provisions of this Agreement shall not be changed, modified or supplemented except by written instrument signed by each of the parties hereto.

6. ASSIGNMENT

This Agreement is personal to each of the parties hereto, and neither party may assign or delegate any rights or obligations hereunder without first obtaining the written consent of the other party.

7. COMPLIANCE WITH LAWS

The provisions of this Agreement shall be governed by and construed in accordance with the laws of the state of Arizona, County of Maricopa.

8. VEVRAA AND SECTION 503 REGULATIONS

Contractor shall abide by the requirements of 41 CFR §§ 60-1.4(a), 60-300.5(a) and 60-741.5(a). These regulations prohibit discrimination against qualified individuals based on their status as protected veterans or individuals with disabilities, and prohibit discrimination against all individuals based on their race, color, religion, sex, or national origin. Moreover, these regulations require that covered prime contractors and subcontractors take affirmative action to employ and advance in employment individuals without regard to race, color, religion, sex, national origin, protected veteran status or disability.

9. CANCELLATION FOR CONFLICT OF INTEREST

This Agreement is subject to cancellation for conflict of interest pursuant to Arizona Revised Statute § 38-511, the pertinent provisions of which are incorporated into this Agreement by reference.

10. NONAPPROPRIATION

Notwithstanding any other provision, this Agreement may be terminated if for any reason there are not sufficient appropriated and available monies for the purpose of maintaining Contractor's obligations under this Agreement. In the event of such termination, Contractor shall have no further obligation to HSAG.

11. EFFECTIVE DATE

This agreement is effective upon final signature.

(REMAINDER OF THIS PAGE INTENTIONALLY LEFT BLANK)

IN WITNESS WHEREOF, HSAG and Contractor have executed this Agreement through their duly authorized representatives.

Health Services Advisory Group, Inc.

**Pima County on Behalf of the Pima County
Health Department**

APPROVED:

APPROVED:

By: _____

Mary Ellen Dalton, PhD, MBA, RN
Chief Executive Officer

By: _____

Sharon Bronson, Chair
Board of Supervisors

Date: _____

Date: _____

ATTEST:

By: _____

Clerk of the Board

Date: _____

APPROVED AS TO FORM:

By: 

Deputy County Attorney

Date: 4.7.16

APPROVED AS TO CONTENT:

By: 

Department Representative

Date: 4-8-16