



BOARD OF SUPERVISORS AGENDA ITEM REPORT
CONTRACTS / AWARDS / GRANTS

Requested Board Meeting Date: March 7, 2017

or Procurement Director Award ☐

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

Project Title/Description:

Tuberculosis Control Program (Directly Observed Therapy)

Purpose:

The purpose of this funding is to supplement Pima County Health Department efforts to control and prevent tuberculosis (TB) in Pima County by:

- Finding all cases of active TB and ensuring completion of TB therapy by directly observed therapy;
- Identifying, medically evaluating, and ensuring completion of treatment for latent TB infection for contacts to pulmonary TB cases; and
- Reporting TB surveillance data.

This Amendment replaces the previous Price Sheet with a revised Price Sheet. The Price Sheet for 2016 had been increased above the 2015 annual amount due to inclusion of some carry-over funds. This Price Sheet for 2017 reduces the total amount to the 2015 level (\$85,372).

Procurement Method:

N/A

Program Goals/Predicted Outcomes:

To enhance TB case completion of therapy rates through the use of Direct Observation Therapy.

Public Benefit:

Decreased prevalence of TB in the community.

Metrics Available to Measure Performance:

- Percent of cases that completed treatment within 12 months;
- Percent of contacts identified, evaluated, and treated for LTBI;
- Percent of reports that are complete and reported to CDC.

Retroactive:

Yes. The revised Price Sheet is effective January 1, 2017. The final document was received from ADHS on 2/7/17.

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 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: GTAM Department Code: HD Contract Number (i.e., 15-123): 17-44
Amendment No.: Seven AMS Version No.: 1
Effective Date: January 1, 2017 New Termination Date: 12/31/2017 (no change)
☐ Expense ☒ Revenue ☒ Increase ☐ Decrease Amount This Amendment: \$85,372.00
Funding Source(s): ADHS / Federal

Cost to Pima County General Fund: \$0.00

Contact: Sharon Grant
Department: Health Telephone: 724-7842
Department Director Signature/Date: _____ 7 Feb 2017
Deputy County Administrator Signature/Date: _____ 2-15-2017
County Administrator Signature/Date: _____ C. R. Buckley 2/15/17
(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

Contract No: **ADHS16-102509**Amendment No. **7**

Procurement Specialist
Delliah Gonzalez

TUBERCULOSIS CONTROL

It is mutually agreed that the Intergovernmental Agreement referenced is amended as follows:

1. Pursuant to Terms and Conditions, Provision Six (6), Contract Changes, Item 6.1, Amendments, Purchase Orders and Change Orders; the Contract is amended as follows:

1.1 Add Provision (23) to the Terms and Conditions to read as follows:

23. Contracting; Procurement; Investment; Prohibitions

- 23.1 A public entity may not enter into a contract with a company to acquire or dispose of services, supplies, information technology or construction unless the contract includes a written certification that the company is not currently engaged in, and agrees for the duration of the contract to not engage in, a boycott of Israel.
- 23.2 A public entity may not adopt a procurement, investment or other policy that has the effect of inducing or requiring a person or company to boycott Israel.
- 23.3 Contractor hereby certifies that it is not currently engaged in, and will not for the duration of this Contract engage in, a boycott of Israel as defined by A.R.S. § 35-393.01. Violation of this certification by Contractor may result in action by the State up to and including termination of this Contract.

1.2 The Revised Price Sheet included in this Amendment is hereby added and made part of the Contract.

ALL OTHER PROVISIONS OF THIS AGREEMENT REMAIN UNCHANGED**PIMA COUNTY HEALTH DEPARTMENT**

Contractor Name

3950 S. COUNTRY CLUB ROAD, SUITE #100

Address

TUCSON**ARIZONA****85714**

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.

Signature

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 _____ 201__

Procurement Officer

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

Date


Assistant Attorney General

Printed Name:

RESERVED FOR USE BY THE SECRETARY OF STATE

REVIEWED BY:

Appointing Authority or Designee
Pima County Health Department

	INTERGOVERNMENTAL AGREEMENT (IGA) AMENDMENT		ARIZONA DEPARTMENT OF HEALTH SERVICES 1740 W. Adams, Room 303 Phoenix, Arizona 85007 (602) 542-1040 (602) 542-1741 Fax
	Contract No: ADHS16-102509	Amendment No. 7	Procurement Specialist Delilah Gonzalez

TUBERCULOSIS CONTROL

Revised Price Sheet

Effective January 01, 2017

	ACCOUNT CLASSIFICATION	AMOUNT
1.	Personnel Services and ERE	\$63,853.00
2.	Professional and Outside Services	\$0.00
3.	Travel Expenses	\$6,800.00
4.	Other Operating Expenses	\$14,718.00
5.	Capital Outlay Expenses	\$1.00
6.	Other	\$0.00
	TOTAL	\$85,372.00

NOTE: With prior approval from the ADHS TB Program Manager, the contractor is authorized to transfer up to a maximum of 35% of the total budget amount between line items. Transfers of funds are only allowed between funded line items. Transfers exceeding 35% or to a non-funded item shall require an amendment.