

BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

← Award ← Contract ← Grant	Requested Board Meeting Date: October 5, 2021	
* = Mandatory, information must be provided	or Procurement Director Award:	
*Contractor/Vendor Name/Grantor (DBA):		
Arizona Department of Health Services (ADHS)		
*Project Title/Description:		
STD Control Services		

*Purpose:

The Arizona Department of Health Services (ADHS) and the Pima County Health Department (PCHD) entered into an Intergovernmental Agreement for a five year term, beginning January 1, 2019, for STD prevention and control in Pima County. PCHD and ADHS seek to build upon the current infrastructure that provides surveillance, epidemiology, disease investigation, prevention, policy and communication to expand and identify new interventions that include: screening and treatment, partner services, outreach, community collaborations, linkage to care, and health promotions that address the target populations and geographical areas of high prevalence in Pima County. The changing health care landscape and information technology advances present opportunities and challenges to improve STD prevention programs.

Amendment #3 changes the Price Sheet for 2021, more than doubling the budget to allow for hiring additional Communicable Disease Investigator positions and increased travel to rural areas.

*Procurement Method:

This Revenue Contract is a non-Procurement contract and not subject to Procurement rules.

*Program Goals/Predicted Outcomes:

Decrease the prevalence and potential to transmit STD infection in the community through proper screening, timely treatment, and increased education of our most at-risk populations: adolescents, young adults, men who have sex with men, and women of childbearing age. In addition to the reporting, prevention and control measures stated in the Arizona Revised Statutes, Title 9, Chapter 6, Articles 1 through 11, the PCHD will build upon the current infrastructure that provides surveillance, epidemiology, disease investigation, prevention, policy and communication to expand and identify new interventions that include: screening and treatment, partner services, outreach, community collaborations, linkage to care, and health promotions that address the target populations and geographical areas of high prevalence in Pima County.

*Public Benefit:

The Health Department has a statutory obligation to investigate infectious or contagious disease and adopt measures to prevent the spread of disease as referenced in ARS 36-624.

*Metrics Available to Measure Performance:

- · Increase the number of STD records with complete data for key epidemiological fields by 10%.
- · Increase the number of STD records dispositioned within 30 days by 10%.
- · Increase the number of early syphilis cases that have at least one partner treated in 30 days of initial test by 10%.
- · Increase the number of syphilis cases that are screened for HIV/AIDS within 30 days of initial syphilis test by 15%.
- · Increase the proportion of target populations (youth, MSM, and women of childbearing age) who receive at least annual STD screening by 20%.
- · Reduce the percent of gonorrhea cases that receive non-CDC recommended treatment by 10%.
- · Improve health department policies for STD prevention by using data to inform policy change and development.

*Retroactive:

No in that it is effective upon signature. However, the revised budget begins Jan. 1. 2021.

GMI Approved 9/20/2128

THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (*) fields

Contract / Award Information	
Document Type: Depar	tment Code: Contract Number (i.e., 15-123):
Commencement Date: Termin	nation Date: Prior Contract Number (Synergen/CMS):
Expense Amount \$*	Revenue Amount: \$
*Funding Source(s) required:	
Funding from General Fund? Tyes C No	If Yes \$
Contract is fully or partially funded with Federal Full If Yes, is the Contract to a vendor or subrecipien	
Were insurance or indemnity clauses modified? If Yes, attach Risk's approval.	C Yes C No
Vendor is using a Social Security Number? If Yes, attach the required form per Administrative Pro-	C Yes C No
Amendment / Revised Award Information	
Document Type: Departr	ment Code: Contract Number (i.e., 15-123):
Amendment No.:	AMS Version No.:
Commencement Date:	New Termination Date:
	Prior Contract No. (Synergen/CMS):
C Expense C Revenue C Increase C D	Pecrease Amount This Amendment: \$
Is there revenue included? Tyes O. No	
Is there revenue included?	If Yes \$
*Funding Source(s) required:	If Yes \$
is there revenue meiuded:	If Yes \$ If Yes \$
*Funding Source(s) required:	If Yes \$
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*Funding Source(s) required: Funding from General Fund? Yes No Grant/Amendment Information (for grants acceed to be presented to be part of the second to be part of the	If Yes \$
*Funding Source(s) required: Funding from General Fund? Grant/Amendment Information (for grants access Document Type: GTAM Departr Commencement Date: 01/01/2021 Match Amount: \$ *All Funding Source(s) required: Centers for Dis *Match funding from General Fund? *Match funding from other sources? *Funding Source: *If Federal funds are received, is funding coming Received via ADHS Contact: Sharon Grant	If Yes \$



Amendment

IGA Amendment No.: 3

ARIZONA DEPARTMENT OF HEALTH SERVICES 150 18th Ave Suite 530 Phoenix, Arizona 85007

Procurement Officer
Karla Varela

STD Control Services

- 1. Effective upon signature by all parties and pursuant to the Terms and Conditions, Provision Six (6), Contract Changes, Section 6.1, Amendments, Purchases Orders and Change Orders it is mutually agreed that the Intergovernmental Agreement referenced is amended as follows under this Amendment Three (3):
 - 1.1. The Price Sheet of the Agreement is hereby revised and replaced; and

Agreement No.: CTR040484

1.2. Exhibit A has been added.

ALL CHANGES ARE REFLECTED BELOW IN RED.

All other provisions of this Agreement remain unchanged.				
PIMA COUNTY HEALTH	DEPARTMENT			
Contractor Name:			Authorized Signature	
3950 South Country Clu	b Road, #100			
Address:			Print Name	
Tucson	Arizona	85714		
City	State	Zip	Title	
	t, the undersigned public agen Agreement is in proper form an aws of Arizona		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	
Signature	Date		Signed thisday of2021.	
Jonathan Pink	ney			
Print Name			Procurement Officer	
reviewed pursuant to A.R.S.	which is an Agreement between § 11-952 by the undersigned or form and is within the powers ona.	Assistant Attorney, who has	.h.	
Signature	Date		Appointing Authority or Designee	
Drint Name	Assistant Attorne	y General	Pima County Health Department	
Print Name				



Amendment

Agreement No.: CTR040484 IGA Amendment No.: 3

ARIZONA DEPARTMENT
OF HEALTH SERVICES
150 18th Ave Suite 530

150 18th Ave Suite 530 Phoenix, Arizona 85007

Procurement Officer Karla Varela

PRICE SHEET

Effective 1/1/2021

COST REIMBURSEMENT LINE ITEMS	BUDGETED AMOUNT
Personnel Services	\$233,934.00
Employee Related Expenses (ERE)	\$81,876.00
Professional & Outside Services	\$1.00
Travel	\$3,752.00
Other Operating	\$1.00
Indirect	\$31,956.00
TOTAL (Not to exceed	\$351,520.00

- The Contractor shall receive a budget increase in 2021. The additional funds will be allocated for personnel services and other operating expenses.
- NOTE: With prior approval from the Program Manager, the Contractor is authorized to transfer up to a maximum of thirty percent (30%) of the total budget amount between line items. Transfers of funds are only allowed between funded line items. Transfers exceeding thirty percent (30%) or to a non-funded item shall require a written Amendment.



Amendment

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ARIZONA DEPARTMENT OF HEALTH SERVICES 150 18th Ave Suite 530 Phoenix, Arizona 85007

Procurement Officer Karla Varela

EXHIBIT A

Exhibit - 2 CFR 200.332 § 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: DUNS #	Arizona Department of Health Services 804745420
Federal Award Identification (Grant Number):	1 NH25PS005157-01-00
Subrecipient name (which must match the name associated with its unique entity identifier):	Pima County Health Department
Subrecipient's unique entity identifier (DUNS #):	144733792
Federal Award Identification Number (FAIN, sometimes it's the same as the Grant Number):	NH25PS005157
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;	03/11/2021
Subaward Period of Performance Start and End Date;	01/01/2021-12/31/2021
Subaward Budget Period Start and End Date:	01/01/2021-12/31/2021
Amount of Federal Funds Obligated by this action by the pass-through entity to the subrecipient (this is normally the contract amount):	
	\$ 351,520.00
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):	\$ 351,520.00
Total Amount of the Federal Award committed to the subrecipient by the pass-through entity	\$ 351,520.00



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ARIZONA DEPARTMENT OF HEALTH SERVICES

150 18th Ave Suite 530 Phoenix, Arizona 85007

Procurement Officer Karla Varela

Federal award project description, as required to be responsive to the Federal Funding Accountability and Transparency Act (FFATA)	Strengthening Sexually Transmitted Disease Prevention and Control in Arizona
Name of Federal awarding agency, pass-through entity, and contact information for awarding official of the Pass-through entity	Centers for Disease Control and Prevention
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 disbursement:	93.977 - Preventive Health Services, Sexually Transmitted Diseases Control Grants
Identification of whether the award is R&D	N
Indirect cost rate for the Federal award (including if the de minimis rate is charged) per § 200.414	

10%