

COCHISE COUNTY GRANT APPROVAL FORM

Form Initiator: JENNIFER STEIGER

Date Prepared: Oct 17, 2014

Point of Contact: JENNIFER STEIGER

Phone Number: 520-432-9402

Department: Health

PRIMARY GRANT

Primary Grantor: ADHS

CFDA: www.CFDA.gov

Grant Title: BNPA - WIC, BFPC, AND FMNP

Grant Term From: Oct 1, 2014

To: Sep 30, 2015

Total Award Amount: 617,930

New Grant: Yes No

Grant No.: IGA#: ADHS14-053052

Amendment No.: 1

Funding No.: 228

If new, Finance will assign a funding number.

Strategic Plan: Health & Wellbeing

District: CW

Mandated by Law? Yes No

Number of Positions Funded: 16

Asset(s) Acquired:

Briefly describe the purpose of the grant.

The WIC Program is a supplemental nutrition program for income-eligible women, infants, and children. The Program provides clients with nutrition education and referrals to social services within the County.

If this is a mandated service, cite the source. If not mandated, cite indications of local customer support for this service.

PRIMARY FUNDING SOURCE:

Funding Year: Federal Funds 332.100
State Funds 336.100
County Funds 391.000
Other Funds:
Total Funds:

Funding Year: Federal Funds 332.100
State Funds 336.100
County Funds 391.000
Other Funds:
Total Funds:

Funding Year: Federal Funds 332.100
State Funds 336.100
County Funds 391.000
Total Revenue:

Has this amount been budgeted? Yes No

Method of collecting funds: Lump Sum Quarterly Draw Reimbursement

Is revertment of unexpended funds required at the end of grant period? Yes No

(a) Total A-87 Cost Allocation: (b) Amount of overhead allowed by grant:

County Subsidy (a) - (b):

Does Grantor accept indirect costs as an allowable expenditure? Yes No

If yes, dollar amount or percentage allowed:

PRIMARY FUNDING SOURCE:

Funding Year: Federal Funds 332.100
State Funds 336.100
County Funds 391.000
Other Funds:
Total Funds:

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State Funds 336.100
County Funds 391.000
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Is revertment of unexpended funds required at the end of grant period? Yes No

(a) Total A-87 Cost Allocation: (b) Amount of overhead allowed by grant:

County Subsidy (a) - (b):

Does Grantor accept indirect costs as an allowable expenditure? Yes No

If yes, dollar amount or percentage allowed:

Is County match required? Yes No

County Match Source:

County match dollar amount or percentage:

Signature: J. STEIGER

Board Approval:

Date

Print Form

Submit by Email to Finance

Please e-mail completed form to Finance ldevore@cochise.az.gov.

NOTE: Once approved by the Board of Supervisors, the department is responsible for sending a copy of the fully executed grant document to the Finance Department

Executive Summary Form

Agenda Number:

Recommendation:

Approve, Amendment 1 to IGA#: ADHS14-053052, WIC Services, Breastfeeding Peer Counselor Program (BFPC), and the Farmer's Market Nutrition Program (FMNP), between the Arizona Department of Health Services (ADHS) and the Cochise Health & Social Services, (CHSS); in the amounts of \$569,430, \$48,500, and "as needed", respectively, for the period of 10/1/14 – 9/30/15.

Background (Brief):

The WIC Program is a supplemental nutrition program for income-eligible women, infants, and children. The WIC Program provides income eligible families with nutrition education and referrals to social services within the County. The Program also provides food vouchers to clients for a variety of nutritionally healthy staple foods, including: juice, milk, eggs, peanut butter, and beans.

The Breastfeeding Peer Counselor Program provides counseling and support services that complement the WIC-provided breastfeeding education by allowing for additional, more in-depth education by a peer counselor trained through a breastfeeding curriculum. The goal of the BFPC program is to increase the incidence and duration of breastfeeding for all breastfeeding women in Cochise County.

The Farmers Market Nutrition Program is intended to increase consumption of locally grown fresh fruits and vegetables by providing FMNP checks to a limited number of WIC women and children to purchase these items directly from growers at ADHS-approved farmers' markets in Cochise County.

IGA#: ADHS14-053052 is based on an annual caseload of 3,500 clients.

Fiscal Impact & Funding Sources:

The WIC and BFPC grant is a cost-reimbursement grant. The total net county subsidy for the contract is \$197,011, calculated as follows:

Grant	Amount	Salaries + ERE's	Negotiated Overhead	A-87 OH @44.44%	Net Co. Subsidy
WIC	\$569,430	\$495,069	\$37,013	\$220,009	\$182,996
BFPC	\$48,500	\$31,538	\$0	\$14,015	\$14,015
FM	"As Needed"	\$0	\$0	\$0	\$0
Total:	\$617,930	\$526,607	\$37,013	\$234,024	\$197,011

Next Steps/Action Items/Follow-up:

Your approvals are respectfully requested.

Impact of Not Approving:

The WIC Program has provided nutrition services to low income families in Cochise County for over 30 years. Approximately 3,500 county residents would be impacted by

Executive Summary Form

the discontinuation of the WIC Program. During these tough economic times Cochise County families are depending on the WIC Program to help meet their nutritional needs.



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: ADHS14-053052

Amendment No. 1

Sr. Procurement Specialist
Mr. Tracey Thomas

BNPA - WIC, BFPC and FMNP

Effective October 1, 2014 it is mutually agreed that the Intergovernmental Agreement referenced is amended as follows:

- 1. The WIC Price Sheet from the original Agreement is hereby replaced with the revised WIC Price Sheet of this Amendment number One (1). The total of the Revised WIC Price Sheet remains the same, \$569,430.00, however there are changes in the individual line items as following:
1.1 Personnel Costs / Salary increased by \$886.00 for a total of \$320,212.00 due to increase in RD salary.
1.2 ERE increased by \$7,237.00 for a total of \$137,357.00 due to increased ERE calculations.
1.3 Travel increased by \$4,088.00 for a total of \$18,500.00 due to new software training travel.
1.4 Other Operating Expense decreased by \$14,470.00 for a total of \$18,845.00 due to operating expenses adjustment to stay within the budget.
1.5 Indirect increased by \$2,259.00 for a total of \$37,013.00 due to indirect cost applied to the total budget.

Continued on next page

CONTRACTOR SIGNATURE

Cochise County Community Health Services

Contractor Name

1415 W Melody Lane, Building A

Address

Bisbee Arizona 85603-3090
City State Zip

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.

Tenny Bannan 10-2-14
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 ___ 2014

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

Under House Bill 2011, A.R.S. § 11-952 was amended to remove the requirement that Intergovernmental Agreements be filed with the Secretary of State.

	INTERGOVERNMENTAL AGREEMENT (IGA) AMENDMENT		Error! Main Document Only. ARIZONA DEPARTMENT OF HEALTH SERVICES 1740 W. Adams, Room 303 Phoenix, Arizona 85007 (602) 542-1040 (602) 542-1741 Fax
	Contract No: ADHS14-053052	Amendment No. 1	Procurement Specialist Mr. Tracey Thomas

2. The BFPC Price Sheet from the original Agreement is hereby replaced with the revised BFPC Price Sheet of this Amendment number One (1). The total of the Revised BFPC Price Sheet is increased from \$43,000.00 to \$48,500.00 due to the following line item changes:

- 2.1 Personnel increased by \$3,240.00 for a total of \$21,840.00 due to increase in pay rate for Peer Counselor and increase in percentage of time allotted for manager.
- 2.2 Employee Related Expenses increased by \$1,063.00 for a total of \$9,698.00 due to increase in benefits paid to part time staff.
- 2.3 Professional and Outside Services increased by \$200.00 for a total of \$7,200.00 due to increase in hours for contract IBCLC.
- 2.4 Travel Expense increased by \$400.00 for a total of \$6,700.00 due to mandatory trip to Phoenix for staff training.
- 2.5 Other Operating Expenses increased by \$597.00 for a total of \$3,060.00 due to increase in program supplies to include printing, office supplies and postage.

3. Replace in its entirety, Special Terms and Conditions, Provision Seventeen (17), Health Insurance Portability and Accountability Act of 1996 with the following:

17. Health Insurance Portability and Accountability Act of 1996

17.1 The Contractor warrants that it is familiar with the requirements of HIPAA, as amended by the Health Information Technology for Economic and Clinical Health Act (HITECH Act) of 2009, and accompanying regulations and will comply with all applicable HIPAA requirements in the course of this Contract. Contractor warrants that it will cooperate with the Arizona Department of Health Services (ADHS) in the course of performance of the Contract so that both ADHS and Contractor will be in compliance with HIPAA, including cooperation and coordination with the Arizona Department of Administration-Arizona Strategic Enterprise Technology (ADOA-ASET) Office, the ADOA-ASET Arizona State Chief Information Security Officer and HIPAA Coordinator and other compliance officials required by HIPAA and its regulations. Contractor will sign any documents that are reasonably necessary to keep ADHS and Contractor in compliance with HIPAA, including, but not limited to, business associate agreements.

17.2 If requested by the ADHS Procurement Office, Contractor agrees to sign a "Pledge To Protect Confidential Information" and to abide by the statements addressing the creation, use and disclosure of confidential information, including information designated as protected health information and all other confidential or sensitive information as defined in policy. In addition, if requested, Contractor agrees to attend or participate in HIPAA training offered by ADHS or to provide written verification that the Contractor has attended or participated in job related HIPAA training that is: (1) intended to make the Contractor proficient in HIPAA for purposes of performing the services required and (2) presented by a HIPAA Privacy Officer or other person or program knowledgeable and experienced in HIPAA and who has been approved by the ADOA-ASET Arizona State Chief Information Security Officer and HIPAA Coordinator.

All other provisions of this agreement remain unchanged.



**INTERGOVERNMENTAL AGREEMENT (IGA)
AMENDMENT**

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HEALTH SERVICES**
1740 W. Adams, Room 303
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(602) 542-1040
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Contract No: ADHS14-053052

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Sr. Procurement Specialist
Mr. Tracey Thomas

PRICE SHEET

October 1, 2014 to September 30, 2015

WIC Services

WIC Services Account Classification	Amount
Personnel	\$320,212.00
Employee Related Expenses	\$137,357.00
Professional & Outside Services	\$1.00
Travel Expense	\$18,500
Occupancy Expenses	\$1.00
Other Operating Expenses	\$18,845.00
Capital Expenditures	\$1.00
Indirect Cost	\$37,013.00
RD Supplement	\$37,500.00
Total	\$569,430.00

Breastfeeding Peer Counseling Services

Account Classification	Amount
Personnel	\$21,840.00
Employee Related Expenses	\$9,698.00
Professional & Outside Services	\$7,200.00
Travel Expense	\$6,700.00
Occupancy Expenses	\$1.00
Other Operating Expenses	\$3,060.00
Capital Expenditures	\$1.00
Indirect Costs	\$0.00
Total	\$48,500.00

**Farmer's Market Nutrition Program Services
March 1, 2015 to September 30, 2015**

Type of Service	Unit Rate	Unit of Measure	Estimated Number of Participants
WIC FMNP Check Issuance	\$1.25	WIC Participant	AS NEEDED

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Additional Terms and Conditions:

With prior written approval from the Program Manager, the Contractor is authorized to transfer up to a maximum of ten percent (10%) of the total budget amount between funded line items except for Registered Dietitian Expenses. Transfers of funds are only allowed between funded line items. Transfers exceeding ten percent (10%) or to a non-funded line item shall require an amendment. The Registered Dietitian line item is meant to fund additional Registered Dietitian position(s) to meet high risk counseling requirements.

Authorization for purchase of services under this Contract shall be made only upon ADHS issuance of a Purchase Order that is signed by an authorized agent. The Purchase Order will indicate the Contract number and the dollar amount of funds authorized. The Contractor shall only be authorized to perform services up to the amount on the Purchase Order. ADHS shall not have any legal obligation to pay for services in excess of the amount indicated on the Purchase Order. No further obligation for payment shall exist on behalf of ADHS unless a.) the Purchase Order is modified with an official ADHS Procurement Change Order, and/or b.) an additional Purchase Order is issued for purchase of services under this Contract.

ADHS reserves the right to adjust awards given to local agencies depending on federal dollars received. Adjustments will be at the discretion of ADHS.

Additional WIC Program:

Should additional administrative monies become available through state or federal grants, ADHS may increase the purchase order to increase the number of participants served and increase the total of this contract.

The assigned caseload for FFY 2015 is: 3,500

Additional Breastfeeding Peer Counseling Program:

Allowable costs for the Peer Counseling Program include compensation for peer counselors and designated peer counselor managers/coordinators, and related costs such as training and training materials; telephone expenses for participant contacts (including pager, cell phones and answering machines); travel for training and home and hospital visits; recruitment of peer counseling staff; and the purchase of demonstration materials (e.g., breast pumps for demonstration purposes, videos). Out of state travel must be pre-approved by ADHS. Items and materials for distribution to WIC participants (e.g. breast pumps, breastfeeding aids, written materials) are not allowable costs.

Farmer's Market Nutrition Program:

If funding for additional FMNP checks becomes available and the contract budget (as shown on the Contract Price Sheet) has been fully expended, Contractor may choose whether or not to distribute the additional checks with no increase in the contract budget.