Policy

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Consent

Consent

SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

FROM: Community Health Agency/Department of Public Health



SUBMITTAL DATE:

April 4, 2012

SUBJECT: Ratify the Amendment to the Master Grant Agreement between State of California Department of Public Health and the County of Riverside Department of Public Health (Agreement 10-95281, A01).

RECOMMENDED MOTION: That the Board of Supervisors:

BACKGROUND: On Page 2

- 1. Ratify the Amendment of the Master Grant Agreement (10-9528, A01) between State of California Department of Public Health and the County of Riverside Department of Public Health, HIV/AIDS Program for a reduction of \$44,591 for year 2 and year 3, and
- 2. Authorize the Chairperson to sign six (6) originals of said Amendment, Contract 10-95281, A01, on behalf of the County.

| | Gusand. Hempla | | | | | | |
|--------|------------------------|---|------------------|-------------------------------------|-------------------------------------|-------------|--|
| | | blic Health | | | | | |
| | VJB/aml/ys | | | | | YES | |
| S | | Current F.Y. Total Cost 11/12 | (\$16,954) | In Current Year | Current Year Budget: | | |
| KIPNIS | FINANCIAL DATA | Current F.Y. Net County Cost: Annual Net County Cost: | \$ 0 \$ 0 | Budget Adjustment: For Fiscal Year: | | NO 11/12 | |
| EAL R. | SOURCE OF FL | JNDS: 100% funded by the | | 1. | Positions To Be Deleted Per A-30 | X | |
| 2 | | Requires 4/5 Vote | | | | | |
| | C.E.O. RECOMMENDATION: | | APPROVE | | | | |
| Policy | County Executi | ive Office Signature | BY: Debra Courno | lemoyel yor | | | |
| Ø | Obuilty Executi | iro cinos cignatare | | | | | |

Dep't Recomm.:

Per Exec. Ofc.:

Prev. Agn. Ref.: 1/11/11, Item 3.21 CHMENTS FILED

District: All Agenda Number:

FORM 11 Page 2 of 2

SUBJECT: Ratify the Amendment to the Master Grant Agreement between State of California Department of Public Health and the County of Riverside Department of Public Health (Agreement 10-95281, A01).

BACKGROUND: (Continued)

The Department of Public Health, HIV/AIDS Program has received funds for HIV Services from the California Department of Public Health since 1984. This Amendment represents a three-year agreement with the California Department of Public Health. Staff and supplies are funded to provide the following services: HIV Prevention Program, HIV Care Program, Minority AIDS Initiative, HIV/AIDS Surveillance Program and Testing and Treatment History.

FINANCIAL DATA: This amendment decreases the funding by \$44,591 for years 2 and 3 of the contract term due to the revised state allocation formulas and the addition of the Testing and Treatment History Program. A budget adjustment was submitted in the first quarter budget report to account for this decrease in funding. This grant does not require any County funds.

| 10/11 Original Award 10-95281 | 11/12 Amendment 1 10-95281, A01 | 12/13 Amendment 1 10-95281, A01 |
|-------------------------------------|---------------------------------------|---|
| \$6,322,887 | (\$ 16,954) | (\$ 27,637) |
| 1/11/11; Item 3.21 | | A SOUTH THE PARTY OF THE PARTY |

STATE OF CALIFORNIA STANDARD AGREEMENT AMENDMENT STD 213A_CDPH (9/09)

| | | Agreement Number | Amendment Number | | | |
|-------------|--|------------------------------|----------------------------------|--|--|--|
| \boxtimes | Check here if additional pages are added: 1 Page(s) | 10-95281 | A01 | | | |
| | | Registration Number: | | | | |
| 1,, | This Agreement is entered into between the State Agency and Contractor named below: | | | | | |
| | State Agency's Name | | Also known as CDPH or the State | | | |
| | California Department of Public Health | | | | | |
| | Contractor's Name | | (Also referred to as Contractor) | | | |
| | County of Riverside | | | | | |
| 2. | The term of this July 1, 2010 through Jur | ne 30, 2013 | | | | |
| | Agreement is: | | | | | |
| 3. | The maximum amount of this \$ 6,278,296 | | | | | |
| | Agreement after this amendment is: Six Million, Two Hundre | ed Seventy Eight Thousand, T | wo Hundred Ninety Six Dollars. | | | |
| 4. | The parties mutually agree to this amendment as follows. All of the Agreement and incorporated herein: | actions noted below are b | y this reference made a part | | | |
| | I. Amendment effective date: July 1, 2011 | | | | | |

- II. Purpose of amendment: This amendment decreases the funding level for years 2 and 3 of the contract term due to the revised state allocation formulas and the addition of the Testing and Treatment History program.
- III. Certain changes made in this amendment are shown as: Text additions are displayed in bold and underline. Text deletions are displayed as strike through text (i.e., Strike).

(Continued on next page)

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto. CALIFORNIA CONTRACTOR **Department of General Services** Contractor's Name (If other than an individual, state whether a corporation, partnership, etc.) **Use Only** County of Riverside By(Authorized Signature) Date Signed (Do not typ æS Printed Name and Title of Person Signing Address C/O Victoria Jauregui Burns, HIV/AIDS Department Chief, County of Riverside P.O. Box 7600, Riverside, CA 92513-7600 STATE OF CALIFORNIA Agency Name California Department of Public Health By (Authorized Signature) Date Signed (Do not type) Æ Printed Name and Title of Person Signing Exempt per: Budget Act of 2011, Chapter 33 Sandra Winters, Chief, Contracts and Purchasing Services Section 1501 Capitol Avenue, Suite 71.5178, MS 1802, P.O. Box 997377, Sacramento, CA 95899-7377

- IV. Paragraph 3 (maximum amount payable) on the face of the original STD 213 is decreased by \$44,591 and is amended to read: \$6,322,887 (Six Million, Three Hundred Twenty Two Thousand, Eight Hundred Eighty Seven Dollars.) \$6,278,296 (Six Million, Two Hundred Seventy Eight Thousand, Two Hundred Ninety Six Dollars.)
- V. Exhibit A, Scope of Work, Provision 4 is amended to update a Project Representative and is to read as follows:

California Department of Public Health

Office of AIDS

Fiscal Management Section
Attention: Christopher Valenzuela Carrie Talbot
Mail Station Code 7700
1616 Capitol Avenue, Suite 616
P.O. Box 997426
Sacramento, CA 95899-7426

Telephone: (916) 449-5932 Fax: (916) 449-5909

VI. Exhibit A, Scope of Work, adds paragraph 5. D in its entirety and should read as follows:

D. Testing and Treatment History

The contractor agrees to improve the completeness of HIV testing and treatment history (TTH) information from HIV diagnosing facilities with the highest number of cases with missing TTH information from 2008 to 2010 while ensuring their routine surveillance procedures collect this information in the future.

VII. Provision 4 (Amounts Payable) of Exhibit B – Budget Detail and Payment Provisions is amended to read as follows:

4. Amounts Payable

- A. The amounts payable under this agreement shall not exceed:
 - 1) \$2,163,855 for the budget period of 07/01/10 through 06/30/11.
 - 2) \$2,079,516 2.062,562 for the budget period of 07/01/11 through 06/30/12.
 - 3) \$2,079,516 2,051,879 for the budget period of 07/01/12 through 06/30/13.
- B. Reimbursement shall be made for allowable expenses up to the amount annually encumbered commensurate with the state fiscal year in which services are performed and/or goods are received.
- VIII. Provision 1 (Additional Incorporated Exhibits) of Exhibit E Additional Provisions is amended to read as follows:

1. Additional Incorporated Exhibits

The following documents and any subsequent updates are not attached, but are incorporated herein and made a part hereof by this reference. These documents may be updated periodically by CDPH, as required by program directives. CDPH shall provide the Contractor with copies of said documents and any periodic updates thereto, under separate cover. CDPH will maintain on file, all documents referenced herein and any subsequent updates.

- 1) HIV/AIDS Surveillance Program MOU, including Amendment 1.
- 2) HIV Care Program MOU, including Amendment 1.
- 3) HIV Prevention Program MOU
- 4) Testing and Treatment History MOU
- IX. All other terms and conditions shall remain the same.