

**KITTITAS COUNTY PUBLIC HEALTH DEPARTMENT
2012 – 2014 CONSOLIDATED CONTRACT**

CONTRACT NUMBER: C16889

AMENDMENT NUMBER: 10

PURPOSE OF CHANGE: To amend this contract between the DEPARTMENT OF HEALTH hereinafter referred to as "DOH", and KITTITAS COUNTY PUBLIC HEALTH DEPARTMENT hereinafter referred to as "LHJ", pursuant to the Modifications/Waivers clause, and to make necessary changes within the scope of this contract and any subsequent amendments thereto.

IT IS MUTUALLY AGREED: That the contract is hereby amended as follows:

1. Exhibit A Statements of Work, attached and incorporated by this reference, are amended as follows:
 - ☒ Adds Statements of Work for the following programs:
 - Public Health Emergency Preparedness & Response (PHEPR) - Effective July 1, 2013
 - ☒ Amends Statements of Work for the following programs:
 - Local Capacity Development Funds - Effective January 1, 2012
 - OICP-PPHF Reimbursement Project - Effective January 1, 2013
 - ☐ Deletes Statements of Work for the following programs:
2. Exhibit B-10 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-9 Allocations as follows:
 - ☒ Increase of \$55,671 for a revised maximum consideration of \$514,323.
 - ☐ Decrease of _____ for a revised maximum consideration of _____.
 - ☐ No change in the maximum consideration of _____.
Exhibit B Allocations are attached only for informational purposes.
3. Exhibit C-3 Schedule of Federal Awards, attached and incorporated by this reference, amends and replaces Exhibit C-2.


Unless designated otherwise herein, the effective date of this amendment is the date of execution.

ALL OTHER TERMS AND CONDITIONS of the original contract and any subsequent amendments remain in full force and effect.


IN WITNESS WHEREOF, the undersigned has affixed his/her signature in execution thereof.

KITTITAS COUNTY PUBLIC HEALTH DEPARTMENT

STATE OF WASHINGTON
DEPARTMENT OF HEALTH



Date



Ann Thompson
Contract Administrator
APPROVED AS TO FORM ONLY
Assistant Attorney General
Date

**2012-2014 CONSOLIDATED CONTRACT
EXHIBIT A
STATEMENTS OF WORK
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Exhibit A
Statement of Work
Contract Term: 2012-2014

DOH Program Name or Title: Local Capacity Development Funds -
Effective January 1, 2012

Local Health Jurisdiction Name: Kittitas County Public Health Department

Contract Number: C16889

SOW Type: Revision **Revision # (for this SOW)** 2

Funding Source <input type="checkbox"/> Federal <Select One> <input checked="" type="checkbox"/> State <input type="checkbox"/> Other	Federal Compliance (if applicable) <input type="checkbox"/> ARRA (Recovery Act) <input type="checkbox"/> FFATA (Transparency Act)	Type of Payment <input type="checkbox"/> Reimbursement <input checked="" type="checkbox"/> Fixed Price
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Period of Performance: January 1, 2012 through June 30, 2013

Statement of Work Purpose: The purpose of this statement of work is to identify the five tasks, as identified and detailed in Appendix A appended hereto, that will be the focus of work for the 2012 calendar year. LHJ will choose one or more of these five tasks on which to work.

Revision Purpose: The purpose of this revision is to terminate the period of performance at June 30, 2013 and eliminate requirements for the July-December 2013 period and remove funding consideration.

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only)		Current Consideration	Change Decrease (-)	Total Consideration
				Start Date	End Date			
GFS Local Capacity	N/A	334.04.92	79110100	01/01/12	06/30/12	22,920	0	22,920
GFS Local Capacity	N/A	334.04.92	79110100	07/01/02	12/31/12	22,920	0	22,920
GFS Local Capacity	N/A	334.04.92	79110100	01/01/13	06/30/13	23,240	0	23,240
GFS Local Capacity	N/A	334.04.92	79110100	07/01/13	12/31/13	23,240	-23,240	0
TOTALS						92,320	-23,240	69,080

Task Number	Task/Activity/Description	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.	<p>LHJ will select one or more of the following tasks as the basis of work that it will undertake to show progress toward achieving that task:</p> <ol style="list-style-type: none"> 1. Participate in or conduct a collaborative process resulting in a comprehensive community health assessment. 2. Conduct and/or implement a comprehensive planning process in partnership with other community organizations resulting in a community health improvement plan. 3. Develop and/or implement a health department organization strategic plan. <p>LHJ will complete Appendix A for calendar year 2012 work and Appendix B for calendar year 2013 work and submit to the DOH per the instructions therein.</p>	<p>Submission of completed Appendix A and documentation that demonstrates the status of achieving the tasks selected to be worked on.</p> <p>Submission of completed Appendix B based on deliverable submitted 12/31/12 and building on completed tasks in 2012.</p>	<p>Between February 15 and March 31, 2012.</p> <p>By February 15, 2013.</p>	<p>\$22,920</p> <p>\$23,240</p>

Task Number	Task/Activity/Description	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
2.	LHJ will work in the area(s) it identified in Appendix A for calendar year 2012 and Appendix B for calendar year 2013. LHJ will submit documentation demonstrating progress made in the areas identified.	Submission of documentation that demonstrates progress made in the areas identified in Appendix A. Documentation shall include at least Appendix A updated to reflect status of work at time of submission, a progress report describing work accomplished to date and a work plan that describes activities expected to be accomplished in remainder of contract year.	By July 31, 2012.	\$18,336
		Submission of final project report that describes progress to date in the five areas of work identified in Appendix A.	By December 31, 2012.	\$4,584
		Submission of documentation that demonstrates progress made in the areas identified in Appendix B. Documentation shall include at least Appendix B updated to reflect status of work at time of submission, a progress report describing work accomplished from December 31, 2012 to date and a work plan that describes activities expected to be accomplished in remainder of 2013.	By July 31, 2013.	\$18,592
		Submission of final project report for 2013 that describes progress to date in the five areas of work identified in Appendix B.	By December 31, 2013.	\$4,648

Program Specific Requirements/Narrative

This section is for program specific information not included elsewhere.

Program Manual, Handbook, Policy References

Information, guidance and resources are available at:

<http://www.doh.wa.gov/PublicHealthandHealthcareProviders/PublicHealthSystemResourcesandServices/CommunityHealthAssessmentandImprovement.aspx>

Special Billing Requirements

This is a fixed price statement of work. Subsequent to submission of deliverable as identified above, LHJ shall bill for the amount associated with that deliverable.

Special Instructions

LHJ should access Appendix A at

<http://www.doh.wa.gov/PublicHealthandHealthcareProviders/PublicHealthSystemResourcesandServices/Funding/ConsolidatedContracts/FormsReportsandProgramInformation.aspx>, download, complete, and submit per time frame in table above. LHJ will use BARS expenditure coding as reflected on Appendix A to report expenditures incurred to undertake the work of this statement of work.

LHJ should access Appendix B at

<http://www.doh.wa.gov/PublicHealthandHealthcareProviders/PublicHealthSystemResourcesandServices/Funding/ConsolidatedContracts/FormsReportsandProgramInformation.aspx>, download, complete, and submit per time frame in table above. LHJ will use BARS expenditure coding as reflected on Appendix B to report expenditures incurred to undertake the work of this statement of work.

DOH Program Contact

Department of Health

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Exhibit A
Statement of Work
Contract Term: 2012-2014

DOH Program Name or Title: OICP-PPHF Reimbursement Project -
Effective January 1, 2013

Local Health Jurisdiction Name: Kittitas County Public Health Department

Contract Number: C16889

SOW Type: Revision **Revision # (for this SOW)** 2

Period of Performance: January 1, 2013 through July 31, 2014

Funding Source <input checked="" type="checkbox"/> Federal Subrecipient <input type="checkbox"/> State <input type="checkbox"/> Other	Federal Compliance (if applicable) <input type="checkbox"/> ARRA (Recovery Act) <input checked="" type="checkbox"/> FFATA (Transparency Act)	Type of Payment <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
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Statement of Work Purpose: The purpose of this statement of work is to identify tasks, deliverables, and funding for participation in the Prevention and Public Health (PPHF) Reimbursement Project.

Revision Purpose: The purpose of this revision is to increase funding and add tasks 4-7.

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only)		Current Consideration	Change Increase (+)	Total Consideration
				Start Date	End Date			
FFY12 PPHF Public Health Reimbursement	93.539	333.93.53	74901220	01/01/13	07/31/14	3,000	21,297	24,297
TOTALS						3,000	21,297	24,297

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Participate in Phase 1 of the Prevention and Public Health Fund (PPHF) Reimbursement Project by completing the following: a. Complete a cost benefit assessment of billing for health care services provided by the LHJ. b. Complete a four-part training on billing strategies conducted by DOH staff		a. Submit a cost benefit assessment (tool will be provided by DOH) b. Submit a Reimbursement Training Evaluation form (to be provided by DOH)	a. 03/31/2013 b. 06/30/2013	Reimbursement for actual costs incurred, not to exceed total funding consideration amount
2	Upon completion of Task 1 activities, complete an Intent to Apply worksheet to indicate whether the LHJ intends to apply for participation in the implementation phase of the project (Phase 2)		Submit an "Intent to Apply" worksheet (to be provided by DOH)	05/06/2013	Reimbursement for actual costs incurred, not to exceed total funding consideration amount

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
3	Complete an application to Apply for Funding for Phase 2 Reimbursement Project - Implementation		Submit application for funding request (to be provided by DOH)	06/14/2013	Reimbursement for actual costs incurred, not to exceed total funding consideration amount
4	<i>Develop an implementation plan that describes how funds will be used to implement or improve immunization billing</i>		<i>PPHF Public Health Reimbursement Project LHJ Implementation Plan and Project Status Report (DOH 348-403)</i>	08/31/2013	<i>Reimbursement for actual costs incurred, not to exceed total funding consideration amount</i>
5	<i>Complete a monthly revenue report for immunization billing</i>		<i>PPHF Public Health Reimbursement Project LHJ Monthly Revenue Report (DOH 348-404)</i>	<i>Monthly, by the 15th of each month</i>	<i>Reimbursement for actual costs incurred, not to exceed total funding consideration amount</i>
6	<i>Complete a mid-project status report including project and billing status, amount of funds used, how funds were used, and challenges and accomplishments</i>		<i>PPHF Public Health Reimbursement Project LHJ Implementation Plan and Project Status Report (DOH 348-403)</i>	01/15/2014	<i>Reimbursement for actual costs incurred, not to exceed total funding consideration amount</i>
7	<i>Complete a final report including project and billing status, amount of funds used, how funds were used, and challenges and accomplishments</i>		<i>PPHF Public Health Reimbursement Project LHJ Implementation Plan and Project Status Report (DOH 348-403)</i>	07/15/2014	<i>Reimbursement for actual costs incurred, not to exceed total funding consideration amount</i>

***For Information Only:**

Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other revised Standards/Measures that may apply, can be found at:

<http://www.doh.wa.gov/PublicHealthandHealthcareProviders/PublicHealthSystemResourcesandServices/PublicHealthImprovementPartnershipPHIP/ResourceCatalog/Standards.aspx>

Program Specific Requirements/Narrative**Special Requirements:****Federal Funding Accountability and Transparency Act (FFATA)**

This statement of work is supported by federal funds that require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how the federal funds are spent.

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Data Universal Numbering System (DUNS®) number.

Information about the LHJ and this statement of work will be made available on <http://USASpending.gov> by DOH as required by P.L. 109-282.

Special Billing Requirements:

Reimbursement for actual costs incurred, not to exceed total funding consideration amount.

DOH Program Contact

Carri Comer, Public Health Reimbursement Grant Coordinator

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Department of Health

PO Box 47843, Olympia WA 98504-7843

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Exhibit A
Statement of Work
Contract Term: 2012-2014

DOH Program Name or Title: Public Health Emergency Preparedness & Response
(PHEPR) - Effective July 1, 2013

Local Health Jurisdiction Name: Kittitas County Public Health Department

Contract Number: C16889

SOW Type: Original **Revision # (for this SOW)**

Period of Performance: July 1, 2013 through June 30, 2014

Funding Source <input checked="" type="checkbox"/> Federal Subrecipient <input type="checkbox"/> State <input type="checkbox"/> Other	Federal Compliance (if applicable) <input type="checkbox"/> ARRA (Recovery Act) <input checked="" type="checkbox"/> FFATA (Transparency Act)	Type of Payment <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
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Statement of Work Purpose: The purpose of this statement of work is to establish the funding and tasks for the Public Health Emergency Preparedness and Response program for the 2013 - 2014 grant period.

Revision Purpose: N/A

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only)		Current Consideration	Change Increase (+)	Total Consideration
				Start Date	End Date			
FFY13 PHEPR LHJ FUNDING	93.069	333.93.06	18101430	07/01/13	06/30/14	0	57,614	57,614
TOTALS						0	57,614	57,614

FFY13 PHEPR LHJ FUNDING (PHEP)

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
Admin 1	Complete reporting templates to comply with federal grant requirements (e.g., performance measures, gap analysis, etc.)		Submit completed templates.	As required	Reimbursement for costs, not to exceed total funding consideration amount.
Admin 2	Develop work plan for the 2014-2015 grant cycle.		Submit completed work plan.	03/14/14	
Admin 3	Complete mid-year and end-of-year reporting templates.		Submit completed reporting templates.	12/20/13 and 06/30/14	
1.1	Submit press release for September as National Preparedness month, focusing on educating public on emergency management information, identified hazards and vulnerabilities and the relationship of risk to human impact.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
1.2	Promote infectious disease control and vaccinations by working towards the Human Health Services (HHS) goal of vaccinating 90 percent of 19-35 month-olds against		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	whooping cough in Kittitas County.				
1.3	Promote training to community partners that work specifically with populations of at-risk individuals.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
3.1	Assist with lead jurisdictional agencies in Incident Command Structure (ICS) to provide services during a Kittitas County incident.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
3.2	Train staff in National Incident management System (NIMS), Incident Command Structure (ICS), and provide professional educational opportunities for staff.			*Please see reporting template for specific due dates.	
3.3	Attend Kittitas County Emergency Management Council (KCEMC) meeting.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
3.3	Annually review and evaluate the Emergency Operation Plan (EOP) incorporating lessons learned from exercises and real events.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
3.3	Review and update County Emergency Management Plan (CEMP), ESF 8		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
4.1	Communicate on a regular basis with the public, health care providers, and emergency partners, information that serves to prevent communicable disease and other public health emergencies in the community.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
4.2	Activate emergency public information system to facilitate public information delivery during a public health emergency.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
4.3	Work with community partners to establish a Joint Incident Command (JIC) system.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
6.3	Exercise the emergency systems including Washington Secure Electronic Communication, Urgent Response and Exchange (WA Secures), satellite phone, and agency phone tree.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
7.1	Identify local legal statutes or policies that define or inhibit public health involvement in mass care operations including inspection duties of sites, medications administered to minors, and possibly providing medications for non-present residents.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	

Task Number	Task/Activity/Description	*May Support PHIP State and Local Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
8	Annually review and evaluate the Strategic National Stockpile (SNS) and Technical Assistance Review (TAR) plans, communicate and coordinate plan to community partners.			*Please see reporting template for specific due dates.	
9	Conduct a discussion and operation based mass vaccination exercise in conjunction with jurisdictional partners.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
10.4	Represent Kittitas County Public Health Department (KCPHD) at Region 7 meetings and attend trainings for regional systems to assist partners.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
13.1	Provide surveillance and investigation of infectious disease outbreaks.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
13.2	Update communicable disease reporting and investigations policy.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
14.1	Annually review responder vaccination records and administer vaccinations as needed.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
15.1	Coordinate with existing volunteer programs and partner organizations to support the pre-incident recruitment of volunteers that may be need in a public health agency's response.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
15.2	Develop Medical Reserve Corp (MRC) Chapter and/or Washington State Emergency Registry of Volunteers (WAserv) Volunteer Plan.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
15.3	Develop Medical Reserve Corp (MRC) Chapter and/or Washington State Emergency Registry of Volunteers (WAserv) Volunteer Training and Recruitment Plan.		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	
15.4	Pre-incident screening and verification of volunteers credentials through emergency system for advance registration of volunteer health professionals (ESAR-VHP) and Medical Reserve Corp (MRC).		Submit mid-year and year-end progress reports summarizing activities.	12/20/13 and 06/30/14	

***For Information Only:**

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Program Specific Requirements/Narrative**Special Requirements:****Federal Funding Accountability and Transparency Act (FFATA)**

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DOH Program Contact

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**EXHIBIT B-10
ALLOCATIONS
Contract Term: 2012-2014**

**Contract Number:
Date:**

**C16889
July 15, 2013**

Chart of Accounts Program Title	Amendment	CFDA*	BARS Revenue Code*	Statement of Work Funding Period		DOH Use Only Chart of Accounts Funding Period		Amount	Funding Period Sub Total	Chart of Accounts Total
				Start Date	End Date	Start Date	End Date			
FFY11 PHEPR LHJ Funding	N/A	93.069	333.93.06	01/01/12	08/09/12	08/10/11	08/09/12	\$26,944		
FFY11 PHEPR LHJ Funding	Amend 2	93.069	333.93.06	01/01/12	08/09/12	08/10/11	08/09/12	\$11,881	\$38,825	
FFY12 PHEPR LHJ Funding	Amend 4	93.069	333.93.06	08/10/12	06/30/13	07/01/12	06/30/13	\$53,888	\$53,888	
FFY13 PHEPR LHJ Funding	Amend 10	93.069	333.93.06	07/01/13	06/30/14	07/01/13	06/30/14	\$57,614	\$57,614	\$150,327
FFY12 317 Ops	N/A	93.268	333.93.26	01/01/12	12/31/12	01/01/12	12/31/12	\$1,885	\$1,885	
FFY13 317 Ops	Amend 6	93.268	333.93.26	01/01/13	12/31/13	01/01/13	12/31/13	\$920		
FFY13 317 Ops	Amend 9	93.268	333.93.26	01/01/13	12/31/13	01/01/13	12/31/13	\$921	\$1,841	\$3,726
FFY12 AFIX	N/A	93.268	333.93.26	01/01/12	12/31/12	01/01/12	12/31/12	\$8,014	\$8,014	
FFY13 AFIX	Amend 6	93.268	333.93.26	01/01/13	12/31/13	01/01/13	12/31/13	\$3,913		
FFY13 AFIX	Amend 9	93.268	333.93.26	01/01/13	12/31/13	01/01/13	12/31/13	\$3,913	\$7,826	\$15,840
FFY12 VFC Ops	N/A	93.268	333.93.26	01/01/12	12/31/12	01/01/12	12/31/12	\$3,506	\$3,506	
FFY13 VFC Ops	Amend 6	93.268	333.93.26	01/01/13	12/31/13	01/01/13	12/31/13	\$1,712		
FFY13 VFC Ops	Amend 9	93.268	333.93.26	01/01/13	12/31/13	01/01/13	12/31/13	\$1,711	\$3,423	\$6,929
FFY11 Strengthening Pub Hlth Infrastructure	Amend 1	93.507	333.93.50	01/01/12	09/29/12	09/30/11	09/29/12	\$9,858	\$9,858	
FFY12 Strengthening Pub Hlth Infrastructure	Amend 6	93.507	333.93.50	10/01/12	09/29/13	09/30/12	09/29/13	\$10,000	\$10,000	\$19,858
FFY12 PPHF Public Health Reimbursement	Amend 6	93.539	333.93.53	01/01/13	07/31/14	07/01/12	08/31/14	\$2,500		
FFY12 PPHF Public Health Reimbursement	Amend 9	93.539	333.93.53	01/01/13	07/31/14	07/01/12	08/31/14	\$500		
FFY12 PPHF Public Health Reimbursement	Amend 10	93.539	333.93.53	01/01/13	07/31/14	07/01/12	08/31/14	\$21,297	\$24,297	\$24,297
FFY12 PPHF VTrckS-IIS Interface	Amend 7	93.539	333.93.53	03/01/13	06/30/13	07/01/12	08/31/14	\$343		
FFY12 PPHF VTrckS-IIS Interface	Amend 9	93.539	333.93.53	03/01/13	06/30/13	07/01/12	08/31/14	\$857	\$1,200	\$1,200
FFY11 PHEPR HC Systems - Prep	Amend 1	93.889	333.93.88	01/01/12	06/30/12	07/01/11	06/30/12	\$5,000	\$5,000	\$5,000
FFY11 MCHBG HCO ConCon Federal	Amend 2	93.994	333.93.99	01/01/12	09/30/12	10/01/10	09/30/12	\$10,904	\$10,904	
FFY12 MCHBG HCO ConCon Federal	N/A	93.994	333.93.99	01/01/12	12/31/12	10/01/11	09/30/13	\$32,713		
FFY12 MCHBG HCO ConCon Federal	Amend 2	93.994	333.93.99	01/01/12	12/31/12	10/01/11	09/30/13	\$700	\$33,413	\$44,317
FFY13 MCHBG OHC ConCon Federal	Amend 6	93.994	333.93.99	01/01/13	09/30/13	10/01/12	09/30/13	\$21,916		
FFY13 MCHBG OHC ConCon Federal	Amend 9	93.994	333.93.99	01/01/13	09/30/13	10/01/12	09/30/13	\$10,958	\$32,874	\$32,874

Kittitas County Public Health Department

EXHIBIT B-10
ALLOCATIONS
 Contract Term: 2012-2014

Contract Number:
 Date:

C16889
 July 15, 2013

Chart of Accounts Program Title	Amendment	CFDA*	BARS Revenue Code*	Statement of Work Funding Period		DOH Use Only Chart of Accounts Funding Period		Amount	Funding Period Sub Total	Chart of Accounts Total
				Start Date	End Date	Start Date	End Date			
GFS Local Capacity	Amend 1	N/A	334.04.92	01/01/12	06/30/12	07/01/11	06/30/13	\$22,920	\$22,920	
GFS Local Capacity	Amend 1	N/A	334.04.92	07/01/12	12/31/12	07/01/11	06/30/13	\$22,920	\$22,920	
GFS Local Capacity	Amend 7	N/A	334.04.92	01/01/13	06/30/13	07/01/11	06/30/13	\$23,240	\$23,240	
GFS Local Capacity	Amend 7	N/A	334.04.92	07/01/13	12/31/13	07/01/13	12/31/13	\$23,240		
GFS Local Capacity	Amend 10	N/A	334.04.92	07/01/13	12/31/13	07/01/13	12/31/13	(\$23,240)	\$0	\$69,080
Youth Tobacco Prevention	N/A	N/A	334.04.93	01/01/12	06/30/12	07/01/11	06/30/13	\$2,893	\$2,893	
Youth Tobacco Prevention	Amend 3	N/A	334.04.93	07/01/12	06/30/13	07/01/11	06/30/13	\$6,982	\$6,982	\$9,875
Blue Ribbon Local Health Funds	Amend 1	N/A	334.04.99	00/00/00	00/00/00	00/00/00	00/00/00	\$30,000		
Blue Ribbon Local Health Funds	Amend 3	N/A	334.04.99	00/00/00	00/00/00	00/00/00	00/00/00	\$30,000		
Blue Ribbon Local Health Funds	Amend 7	N/A	334.04.99	00/00/00	00/00/00	00/00/00	00/00/00	\$60,000	\$120,000	\$120,000
Drinking Water Group A - SS	N/A	N/A	346.26.64	01/01/12	12/31/12	07/01/11	06/30/13	\$3,500		
Drinking Water Group A - SS	Amend 1	N/A	346.26.64	01/01/12	12/31/12	07/01/11	06/30/13	(\$3,250)		
Drinking Water Group A - SS	Amend 2	N/A	346.26.64	01/01/12	06/30/13	07/01/11	06/30/13	\$2,000		
Drinking Water Group A - SS	Amend 6	N/A	346.26.64	01/01/12	06/30/13	07/01/11	06/30/13	\$1,000	\$3,250	
Drinking Water Group A - SS	Amend 6	N/A	346.26.64	07/01/13	12/31/13	07/01/13	12/31/13	\$1,250	\$1,250	\$4,500
Drinking Water Group A - SS State	N/A	N/A	346.26.65	01/01/12	06/30/13	07/01/11	06/30/13	\$3,500		
Drinking Water Group A - SS State	Amend 1	N/A	346.26.65	01/01/12	06/30/13	07/01/11	06/30/13	(\$3,250)		
Drinking Water Group A - SS State	Amend 2	N/A	346.26.65	01/01/12	06/30/13	07/01/11	06/30/13	\$2,000		
Drinking Water Group A - SS State	Amend 6	N/A	346.26.65	01/01/12	06/30/13	07/01/11	06/30/13	\$1,000	\$3,250	
Drinking Water Group A - SS State	Amend 6	N/A	346.26.65	07/01/13	12/31/13	07/01/13	12/31/13	\$1,250	\$1,250	\$4,500
Drinking Water Group A - TA	N/A	N/A	346.26.66	01/01/12	06/30/13	07/01/11	06/30/13	\$2,000		
Drinking Water Group A - TA	Amend 6	N/A	346.26.66	01/01/12	06/30/13	07/01/11	06/30/13	\$1,000		
Drinking Water Group A - TA	Amend 7	N/A	346.26.66	01/01/12	06/30/13	07/01/11	06/30/13	(\$2,000)	\$1,000	
Drinking Water Group A - TA	Amend 6	N/A	346.26.66	07/01/13	12/31/13	07/01/13	12/31/13	\$1,000	\$1,000	\$2,000
TOTAL								\$514,323	\$514,323	
Total consideration:			\$458,652					GRAND TOTAL		\$514,323
			\$55,671							
GRAND TOTAL			\$514,323					Total Fed		\$304,368
								Total State		\$209,955

*Catalog of Federal Domestic Assistance

**Federal revenue codes begin with "333". State revenue codes begin with "334".

Exhibit Schedule of Federal Awards

AMENDMENT #10

AFRS Through Bien 2013 Fiscal Month 19

KITTITAS COUNTY HEALTH DEPT-SWV0010475-07

CONTRACT C1688900-Kittitas County Public Health Department

CONTRACT PERIOD 1/1/2012-12/31/2014

Date: July 15, 2013

DOH Title	BARS	DOH Project	Alloc Period	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Grant Award Number	Federal Grant Award Name
FFY11 PHEPR LHJ FUNDING	333.93.06	1844-09	01/01/12-06/30/12	\$36,086	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	5U90TP0017010-11	PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT
FFY12 PHEPR LHJ FUNDING	333.93.06	1847-12	08/10/12-06/30/13	\$53,888	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	1U90TP000559-01AB	TP12-1201 HPP AND PHEP COOPERATIVE AGREEMENTS
FFY13 PHEPR LHJ FUNDING	333.93.06	1850-12	07/01/13-06/30/14	\$67,414	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	6U90TP000663-02	TP12-1201 HPP AND PHEP COOPERATIVE AGREEMENTS
FFY12 317 OPS	333.93.26	3840-10	01/01/12-12/31/12	\$1,885	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	5H23IP022548-10	IMMUNIZATION AND VACCINES FOR CHILDREN GRANTS
FFY13 317 OPS	333.93.26	3841-10	01/01/13-12/31/13	\$1,881	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	1H23IP000782-317 OPS	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY12 VFC OPS	333.93.26	3840-12	01/01/12-12/31/12	\$3,506	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	5H23IP022548-10	IMMUNIZATION AND VACCINES FOR CHILDREN GRANTS
FFY13 VFC OPS	333.93.26	3841-12	01/01/13-12/31/13	\$3,423	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	1H23IP000782-VFC OPS	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY12 AFIX	333.93.26	3840-14	01/01/12-12/31/12	\$8,014	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	5H23IP022548-10	IMMUNIZATION AND VACCINES FOR CHILDREN GRANTS
FFY13 AFIX	333.93.26	3841-14	01/01/13-12/31/13	\$7,938	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	1H23IP000782-AFIX	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY11 STRENGTHENING PUB HLTH INFRAST	333.93.50	9107-99	01/01/12-09/29/12	\$9,858	93.507	Pregnancy Assistance Fund Program	Department of Health and Human Services Office of the Secretary	5U58CD001318-02	STRENGTHENING PUBLIC HEALTH INFRASTRUCTURES FOR IMPROVED HEALTH OUTCOMES
FFY12 STRENGTHENING PUB HLTH INFRAST	333.93.50	9108-99	10/01/12-09/29/13	\$10,000	93.507	Pregnancy Assistance Fund Program	Department of Health and Human Services Office of the Secretary	6U58CD001318-02	CD10-1011 STRENGTHENING PUBLIC HEALTH INFRASTRUCTURE
FFY12 PPHF PUBLIC HEALTH REIMBURSEMENT	333.93.53	3842-99	01/01/13-07/31/14	\$24,287	93.539	PPHF 2012 Prevention and Public Health Fund (Affordable Care Act) Capacity Building Assistance to Strengthen Public Health Infrastructure and Public Health Fund Capacity Building Assistance to Strengthen Public Health Infrastructure	Department of Health and Human Services Centers for Disease Control and Prevention	3H23IP000561-01S1	PREVENTION AND PUBLIC HEALTH FUND CAPACITY BUILDING ASSISTANCE TO STRENGTHEN PUB
FFY12 PPHF VITROGEN INTERFACE	333.93.53	3843-99	01/01/13-07/31/14	\$1,200	93.539	PPHF 2012 Prevention and Public Health Fund (Affordable Care Act) Capacity Building Assistance to Strengthen Public Health Infrastructure	Department of Health and Human Services Centers for Disease Control and Prevention	3H23IP000561-01S1	PREVENTION AND PUBLIC HEALTH FUND CAPACITY BUILDING ASSISTANCE TO STRENGTHEN PUB
FFY11 PHEPR HC SYSTEMS-PREP	333.93.88	6139-01	01/01/12-06/30/12	\$5,000	93.889	National Bioterrorism Hospital Preparedness Program	Department of Health and Human Services Office of the Secretary	5U3REP090228-03-00	FY10 HOSPITAL PREPAREDNESS PROGRAM

Exhibit C-3 Schedule of Federal Awards

AMENDMENT #10

AFRS Through Blen 2013 Fiscal Month 19

Date: July 15, 2013

KITTITAS COUNTY HEALTH DEPT-SWV0010475-07

CONTRACT C1688900-Kittitas County Public Health Department

CONTRACT PERIOD 1/1/2012-12/31/2014

DOH Title	BARS	DOH Project	Alloc Period	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Grant Award Number	Federal Grant Award Name
FFY11 MCHBG HCO CONCON FEDERAL	333,93.99	3021-05	01/01/12-09/30/12	\$10,504	93,994	Maternal and Child Health Services Block Grant to the States	Department of Health and Human Services Health Resources and Services Administration	1B04MC21091-01	MATERNAL AND CHILD HEALTH SERVICES
FFY12 MCHBG HCO CONCON FEDERAL	333,93.99	3022-05	01/01/12-12/31/12	\$33,413	93,994	Maternal and Child Health Services Block Grant to the States	Department of Health and Human Services Health Resources and Services Administration	1B04MC23416-01-00	MATERNAL AND CHILD HEALTH SERVICES
FFY13 MCHBG HCO CONCON FEDERAL	333,93.99	3023-05	01/01/12-09/30/13	\$32,074	93,994	Maternal and Child Health Services Block Grant to the States	Department of Health and Human Services Health Resources and Services Administration	1B04MC23375-01-00	MATERNAL AND CHILD HEALTH SERVICES

Kittitas County Review Form Grants & Contract Agreement



Today's Date 08/23/2013	Agenda Date
Fund/Department 116-Public Health	

Contract/Grant Information

Contract /Grant Agency: Consolidated Contract Amendment 10	
Period Begin Date: January 2012	Period End Date: July 2014
Total Grant/Contract Amount: Increase of \$55,671.00 for a new maximum of \$514,323.00	
Grant/Contract Number: C16889	
<p>Contract/Grant Summary:</p> <p>The Consolidated Contract Amendment 10 adds the following program Statements of Work:</p> <ul style="list-style-type: none"> Public Health Emergency Preparedness and Response- Effective July 1, 2013 <p>Amends the following program Statements of Work:</p> <ul style="list-style-type: none"> Local Capacity Development Funds- Effective January 1, 2012 OICP-PPHF Reimbursement project- Effective January 1, 2013 <p>Exhibit B-10 Allocations:</p> <ul style="list-style-type: none"> Increase of \$55,671.00 for a revised maximum consideration of \$514,323 	

Recommendation for Board of Health and Board of Health Review on _____

Department Head Signature: <u></u> Administrator	Date: <u>9/6/13</u>
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Kittitas County Prosecutor, Auditor, and Board of Health Review and Comment:

APPROVED AS TO FORM:

<u></u> Signature of Prosecutor's Office	<u>9/16/2013</u> Date
<u></u> Signature of Auditor's Office	<u>9/19/13</u> Date
<u></u> Signature of Board of Health member	<u>19 Sept 13</u> Date

Financial Information

Total Amount \$	State Funds \$	Federal Funds \$
Percentage County Funds	Matching Funds \$	CFDA#

	In-Kind \$ Explain
Is Equipment being purchased?	Who owns equipment?
New Personnel being hired?	Contact HR hiring – reporting requirements
Future impacts or liability to Kittitas County:	

Budget Information

Budget Amendment Needed?	Yes <input type="checkbox"/> attach budget form	No <input type="checkbox"/> Why not
New Division Created?		
Revenue Code		

Pass Through Information

Agency to Pass Through	
Amount to Pass Through	\$
Sub-Contract Approved	Date:

Prosecutor Review

Has the Prosecutor reviewed this agreement?	Yes <input type="checkbox"/> No <input type="checkbox"/>
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County Departments Impacted

Auditor	Facilities Maintenance
Information Services	Human Resource
Prosecutor	Treasurer

Submitted

Signature:	Date:
Department:	

Assignment of Tracking Information

Auditor's Office	
Human Resource	
Prosecutor's Office	
Who Signed the grant application	

Reviewer	Date
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