



# INTERGOVERNMENTAL AGREEMENT (IGA)

**ARIZONA DEPARTMENT OF  
HEALTH SERVICES**  
150 North 18<sup>th</sup> Avenue, Suite 530  
Phoenix, Arizona 85007

**Contract No.: CTR055990**

**Project Title:** COVID-19 Health Disparities

**Begin Date:** Upon signature

**Geographic Service Area:** Cochise County

**Termination Date:** 5/31/2023

Arizona Department of Health Services has authority to contract for services specified herein in accordance with A.R.S. §§ 11-951, 11-952, 36-104 and 36-132. The Contractor represents that it has authority to contract for the performance of the services provided herein pursuant to:

**Counties:** A.R.S. §§ 11-201, 11-951, 11-952 and 36-182.

Amendments signed by each of the parties and attached hereto are hereby adopted by reference as a part of this Contract, from the effective date of the Amendment, as if fully set out herein.

<p>Arizona Transaction (Sales) Privilege: _____</p> <p>Federal Employer Identification No.: <u>86-6000398</u> _____</p> <p>Tax License No.: _____</p> <p><b>Cochise Health &amp; Social Services</b> <b>1415 W. Melody Lane, Building A</b> <b>Bisbee, AZ 85603</b></p>	<p align="center"><b>FOR CLARIFICATION, CONTACT:</b></p> <p>Name: <u>Alicia Thompson</u></p> <p>Phone: <u>(520) 366-7412</u></p> <p>FAX No: _____</p> <p>E-mail: <u>athompson@cochise.az.gov</u></p>
<p align="center"><b>CONTRACTOR SIGNATURE:</b></p> <p>The Contractor agrees to perform all the services set forth in the Agreement and Work Statement.</p> <hr/> <p>Signature of Person Authorized to Sign _____ Date _____</p> <p><u>Ann English, Chair Board of Supervisors</u></p> <hr/> <p>Print Name and Title _____</p>	<p><b>This Contract shall henceforth be referred to as Contract</b></p> <p><b>No. <u>CTR055990</u></b> The Contractor is hereby cautioned not to commence any billable work or provide any material, service or construction under this Contract until Contractor receives a fully executed copy of the Contract.</p> <p><b>State of Arizona</b></p> <p>Signed this _____ day of _____, 2021</p> <hr/> <p><b>Procurement Officer</b></p>
<p><b>CONTRACTOR ATTORNEY SIGNATURE:</b></p> <p>Pursuant to A.R.S. § 11-952, the undersigned Contractor's Attorney has determined that this Intergovernmental Agreement is in proper form and is within the powers and authority granted under the laws of Arizona.</p> <hr/> <p>Signature of Person Authorized to Sign _____ Date _____</p> <p><u>Kris Carlson, Deputy County Attorney</u></p> <hr/> <p>Print Name and Title _____</p>	<p><b>Contract, No. CTR055990</b>, 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 the proper form and is within the powers granted under the laws of the State of Arizona to those parties to the Agreement represented by the Attorney General.</p> <p><b>The Attorney General, BY:</b></p> <hr/> <p><b>Signature _____ Date _____</b></p> <p>Assistant Attorney General:</p>

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1. **Definition of Terms.** As used in this Contract, the terms listed below are defined as follows:
- 1.1 “Attachment” means any document attached to the Contract and incorporated into the Contract.
  - 1.2 “ADHS” means Arizona Department of Health Services.
  - 1.3 “Budget Term” means the period of time for which the contract budget has been created and during which funds should be expended.
  - 1.4 “Change Order” means a written order that is signed by a Procurement Officer and that directs the Contractor to make changes authorized by the Uniform Terms and Conditions of the Contract.
  - 1.5 “Contract” means the combination of the Uniform and Special Terms and Conditions, the Specifications and Statement or Scope of Work, Attachments, Referenced Documents, any Contract Amendments and any terms applied by law.
  - 1.6 “Contract Amendment” means a written document signed by the Procurement Officer and the Contractor that is issued for the purpose of making changes in the Contract.
  - 1.7 “Contractor” means any person who has a Contract with the Arizona Department of Health Services.
  - 1.8 “Cost Reimbursement” means a contract under which a contractor is reimbursed for costs, which are reasonable, allowable and allocable in accordance with the contract terms and approved by ADHS.
  - 1.9 “Days” means calendar days unless otherwise specified.
  - 1.10 “Fixed Price” establishes a set price per unit of service. The set price shall be based on costs, which are reasonable, allowable and allocable.
  - 1.11 “Gratuity” means a payment, loan, subscription, advance, deposit of money, services, or anything of more than nominal value, present or promised, unless consideration of substantially equal or greater value is received.
  - 1.12 “Materials” unless otherwise stated herein, means all property, including but not limited to equipment, supplies, printing, insurance and leases of property.
  - 1.13 “Procurement Officer” means the person duly authorized by the State to enter into and administer Contracts and make written determinations with respect to the Contract.
  - 1.14 “Purchase Order” means a written document that is signed by a Procurement Officer, that requests a vendor to deliver described goods or services at a specific price and that, on delivery and acceptance of the goods or services by ADHS, becomes an obligation of the State.
  - 1.15 “Services” means the furnishing of labor, time or effort by a Contractor or Subcontractor.
  - 1.16 “Subcontract” means any contract, express or implied, between the Contractor and another party or between a subcontractor and another party delegating or assigning, in whole or in part, the making or furnishing of any material or any service required for the performance of this Contract.
  - 1.17 “State” means the State of Arizona and/or the ADHS. For purposes of this Contract, the term “State” shall not include the Contractor.

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**2. Contract Type.**

This Contract shall be:

X Cost Reimbursement

**3. Contract Interpretation.**

3.1. Arizona Law. The law of Arizona applies to this Contract including, where applicable, the Uniform Commercial Code as adopted by the State of Arizona.

3.2. Implied Contract Terms. Each provision of law and any terms required by law to be in this Contract are a part of this Contract as if fully stated in it.

3.3. Contract Order of Precedence. In the event of a conflict in the provisions of the Contract, as accepted by the State and as they may be amended, the following shall prevail in the order set forth below:

3.3.1. Terms and Conditions;

3.3.2. Statement or Scope of Work;

3.3.3. Attachments; and

3.3.4. Referenced Documents.

3.4. Relationship of Parties. The Contractor under this Contract is an independent Contractor. Neither party to this Contract shall be deemed to be the employee or agent of the other party to the Contract.

3.5. Severability. The provisions of this Contract are severable. Any term or condition deemed illegal or invalid shall not affect any other term or condition of the Contract.

3.6. No Parole Evidence. This Contract is intended by the parties as a final and complete expression of their agreement. No course of prior dealings between the parties and no usage of the trade shall supplement or explain any terms used in this document.

3.7. No Waiver. Either party's failure to insist on strict performance of any term or condition of the Contract shall not be deemed a waiver of that term or condition even if the party accepting or acquiescing in the nonconforming performance knows of the nature of the performance and fails to object to it.

3.8. Headings. Headings are for organizational purposes only and shall not be interpreted as having legal significance or meaning.

**4. Contract Administration and Operation.**

4.1. Term. As indicated on the signature page of the Contract, the Contract shall be effective as of the Begin Date and shall remain effective until the Termination Date.

4.2. Contract Renewal. This Contract shall not bind, nor purport to bind, the State for any contractual commitment in excess of the original Contract period. The term of the Contract shall not exceed five years. However, if the original Contract period is for less than five years, the State shall have the right, at its sole option, to renew the Contract, so long as the original Contract period together with the renewal periods does not exceed five years. If the State exercises such rights, all terms, conditions and provisions of the original Contract shall remain the same and apply during the renewal period with the exception of price and Scope of Work, which may be renegotiated.

4.3. New Budget Term. If a budget term has been completed in a multi-term Contract, the parties may agree to

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change the amount and type of funding to accommodate new circumstances in the next budget term. Any increase or decrease in funding at the time of the new budget term shall coincide with a change in the Scope of Work or change in cost of services as approved by the Arizona Department of Health Services.

- 4.4. Non-Discrimination. The Contractor shall comply with State Executive Order No. 2009-09 and all other applicable Federal and State laws, rules and regulations, including the Americans with Disabilities Act.
- 4.5. Records and Audit. Under A.R.S. § 35-214 and A.R.S. § 35-215, the Contractor shall retain and shall contractually require each subcontractor to retain all data and other records (“records”) relating to the acquisition and performance of the Contract for a period of five years after the completion of the Contract. All records shall be subject to inspection and audit by the State and where applicable the Federal Government at reasonable times. Upon request, the Contractor shall produce a legible copy of any or all such records.
- 4.6. Financial Management. For all contracts, the practices, procedures, and standards specified in and required by the Accounting and Auditing Procedures Manual for the ADHS funded programs shall be used by the Contractor in the management of Contract funds and by the State when performing a Contract audit. Funds collected by the Contractor in the form of fees, donations and/or charges for the delivery of these Contract services shall be accounted for in a separate fund.
  - 4.6.1. Federal Funding. Contractors receiving federal funds under this Contract shall comply with the certified finance and compliance audit provision of the Office of Management and Budget (OMB) Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR 200), if applicable. The federal financial assistance information shall be stated in a Change Order or Purchase Order.
  - 4.6.2. State Funding. Contractors receiving state funds under this Contract shall comply with the certified compliance provisions of A.R.S. § 35-181.03.
- 4.7. Inspection and Testing. The Contractor agrees to permit access, at reasonable times, to its facilities.
- 4.8. Notices. Notices to the Contractor required by this Contract shall be made by the State to the person indicated on the signature page by the Contractor, unless otherwise stated in the Contract. Notices to the State required by the Contract shall be made by the Contractor to an ADHS Procurement Officer, unless otherwise stated in the Contract. An authorized ADHS Procurement Officer and an authorized Contractor representative may change their respective person to whom notice shall be given by written notice, and an amendment to the Contract shall not be necessary.
- 4.9. Advertising and Promotion of Contract. The Contractor shall not advertise or publish information for commercial benefit concerning this Contract without the prior written approval of an ADHS Procurement Officer.
- 4.10. Property of the State.
  - 4.10.1. Equipment. Except as provided below or otherwise agreed to by the parties, the title to any and all equipment acquired through the expenditure of funds received from the State shall remain the property of the State by and through the ADHS and, as such, shall remain under the sole direction, management and control of the ADHS. When this Contract is terminated, the disposition of all such property shall be determined by the ADHS. For Fixed Price contracts, when the Contractor provides the services/materials required by the Contract, any and all equipment purchased by the Contractor remains the property of the Contractor. All purchases of equipment need to be reported to the ADHS Office of Inventory Control.
  - 4.10.2. Title and Rights to Materials. As used in this section, the term “Materials” means all products created or produced by the Contractor under this Contract, including, but not limited to: written and electronic information, recordings, reports, research, research findings, conclusions, abstracts, results, software, data and any other intellectual property or deliverables created, prepared, or received by

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the Contractor in performance of this Contract. Contractor acknowledges that all Materials are the property of the State by and through the ADHS and, as such, shall remain under the sole direction, management and control of the ADHS. The Contractor is not entitled to a patent or copyright on these Materials and may not transfer a patent or copyright on them to any other person or entity. To the extent any copyright in any Materials may originally vest in the Contractor, the Contractor hereby irrevocably transfers to the ADHS, for and on behalf of the State, all copyright ownership. The ADHS shall have full, complete and exclusive rights to reproduce, duplicate, adapt, distribute, display, disclose, publish, release and otherwise use all Materials. The Contractor shall not use or release these Materials without the prior written consent of the ADHS. When this Contract is terminated, the disposition of all such Materials shall be determined by the ADHS. Further, the Contractor agrees to give recognition to the ADHS for its support of any program when releasing or publishing program Materials.

- 4.10.3. Notwithstanding the above, if the Contractor is a State agency, the following shall apply instead: It is the intention of ADHS and Contractor that all material and intellectual property developed under this Agreement be used and controlled in ways to produce the greatest benefit to the parties to this Contract and the citizens of the State of Arizona. As used in this paragraph, "Material" means all written and electronic information, recordings, reports, findings, research information, abstracts, results, software, data, discoveries, inventions, procedures and processes of services developed by the Contractor and any other materials created, prepared or received by the Contractor and subcontractors in performance of this Agreement. "Material" as used herein shall not include any pre-existing data, information, materials, discoveries, inventions or any form of intellectual property invented, created, developed or devised by Contractor (or its employees, subcontractors or agents) prior to the commencement of the services funded by this Agreement or that may result from Contractor's involvement in other service activities that are not funded by the Agreement.
- 4.10.4. Title and exclusive copyright to all Material shall vest in the State of Arizona, subject to any rights reserved on behalf of the federal government. As State agencies and instrumentalities, both ADHS and Contractor shall have full, complete, perpetual, irrevocable and non-transferable rights to reproduce, duplicate, adapt, make derivative works, distribute, display, disclose, publish and otherwise use any and all Material. The Contractor's right to use Material shall include the following rights: the right to use the Material in connection with its internal, non-profit research and educational activities, the right to present at academic or professional meetings or symposia and the right to publish in journals, theses, dissertations or otherwise of Contractor's own choosing. Contractor agrees to provide ADHS with a right of review prior to any publication or public presentation of the Material, and ADHS shall be entitled to request the removal of its confidential information or any other content the disclosure of which would be contrary to the best interest of the State of Arizona. Neither party shall release confidential information to the public without the prior expressly written permission of the other, unless required by the State public records statutes or other law, including a court order. Each party agrees to give recognition to the other party in all public presentations or publications of any Material, when releasing or publishing them.
- 4.10.5. In addition, ADHS and Contractor agree that any and all Material shall be made freely available to the public to the extent it is in the best interest of the State. However, if either party wants to license or assign an intellectual property interest in the material to a third-party for monetary compensation, ADHS and Contractor agree to convene to determine the relevant issues of title, copyright, patent and distribution of revenue. In the event of a controversy as to whether the Material is being used for monetary compensation or in a way that interferes with the best interest of the state or ADHS, then the Arizona Department of Administration shall make the final decision. Notwithstanding the above, "monetary compensation" does not include compensation paid to an individual creator for traditional publications in academia (the copyrights to which are Employee-Excluded Works under ABOR Intellectual Property Policy Section 6-908C.4.), an honorarium or other reimbursement of expenses for an academic or professional presentation, or an unprofitable distribution of Material.
- 4.11. E-Verify Requirements In accordance with A.R.S. § 41-4401, Contractor warrants compliance with all Federal immigration laws and regulations relating to employees and warrants its compliance with Section A.R.S. §

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23-214, Subsection A.

- 4.12. Federal Immigration and Nationality Act. The Contractor shall comply with all federal, state and local immigration laws and regulations relating to the immigration status of their employees during the term of the Contract. Further, the Contractor shall flow down this requirement to all subcontractors utilized during the term of the Contract. The State shall retain the right to perform random audits of Contractor and subcontractor records or to inspect papers of any employee thereof to ensure compliance. Should the State determine that the Contractor and/or any subcontractors be found noncompliant, the State may pursue all remedies allowed by law, including, but not limited to; suspension of work, termination of the Contract for default and suspension and/or debarment of the Contractor.

**5. Costs and Payments**

- 5.1. Payments. Payments shall comply with the requirements of A.R.S. Titles 35 and 41, net 30 days. Upon receipt and acceptance of goods or services, the Contractor shall submit a complete and accurate Contractor's Expenditure Report for payment from the State within thirty (30) days, as provided in the Accounting and Auditing Procedures Manual for the ADHS.

5.2. Recoupment of Contract Payments.

- 5.2.1. Unearned Advanced Funds. Any unearned State funds that have been advanced to the Contractor and remain in its possession at the end of each budget term, or at the time of termination of the Contract, shall be refunded to the ADHS within forty-five (45) days of the end of a budget term or of the time of termination.

- 5.2.2. Contracted Services. In a fixed price contract, if the number of services provided is less than the number of services for which the Contractor received compensation, funds to be returned to the ADHS shall be determined by the Contract price. Where the price is determined by cost per unit of service or material, the funds to be returned shall be determined by multiplying the unit of service cost by the number of services the Contractor did not provide during the Contract term. Where the price for a deliverable is fixed, but the deliverable has not been completed, the Contractor shall be paid a pro rata portion of the completed deliverable. In a cost reimbursement contract, the ADHS shall pay for any costs that the Contractor can document as having been paid by the Contractor and approved by ADHS. In addition, the Contractor will be paid its reasonable actual costs for work in progress as determined by Generally Accepted Accounting Procedures up to the date of contract termination.

- 5.2.3. Refunds. Within forty-five (45) days after the end of each budget term or of the time of termination of the Contract, the Contractor shall refund the greater of: i) the amount refundable in accordance with paragraph 4.2.1, Unearned Advanced Funds; or ii) the amount refundable in accordance with paragraph 5.2.2, Contracted Services.

- 5.2.4. Unacceptable Expenditures. The Contractor agrees to reimburse the ADHS for all Contract funds expended, which are determined by the ADHS not to have been disbursed by the Contractor in accordance with the terms of this Contract. The Contractor shall reimburse ADHS within 45 days of the determination of unacceptability.

- 5.3. Unit Costs/Rates or Fees. Unit costs/rates or fees shall be based on costs, which are determined by ADHS to be reasonable, allowable and allocable as outlined in the Accounting and Auditing Procedures Manual for the ADHS.

5.4. Applicable Taxes.

- 5.4.1. State and Local Transaction Privilege Taxes. The State of Arizona is subject to all applicable state and local transaction privilege taxes. Transaction privilege taxes apply to the sale and are the responsibility of the seller to remit. Failure to collect taxes from the buyer does not relieve the seller

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from its obligation to remit taxes.

5.4.2. **Tax Indemnification.** The Contractor and all subcontractors shall pay all federal, state and local taxes applicable to its operation and any persons employed by the Contractor. Contractor shall require all subcontractors to hold the State harmless from any responsibility for taxes, damages and interest, if applicable, contributions required under Federal, and/or state and local laws and regulations and any other costs, including transaction privilege taxes, unemployment compensation insurance, Social Security and Worker's Compensation.

5.4.3. **I.R.S. W9 Form.** In order to receive payment under any resulting Contract, the Contractor shall have a current I.R.S. W9 Form on file with the State of Arizona.

5.5. **Availability of Funds for the Next Fiscal Year.** Funds may not be presently available for performance under this Contract beyond the first year of the budget term or Contract term. The State may reduce payments or terminate this Contract without further recourse, obligation or penalty in the event that insufficient funds are appropriated in the subsequent budget term. The State shall not be liable for any purchases or Subcontracts entered into by the Contractor in anticipation of such funding. The Procurement Officer shall have the discretion in determining the availability of funds.

5.6. **Availability of Funds for the Current Contract Term.** Should the State Legislature enter back into session and decrease the appropriations through line item or general fund reductions, or for any other reason these goods or services are not funded as determined by ADHS, the following actions may be taken by ADHS:

5.6.1. Accept a decrease in price offered by the Contractor;

5.6.2. Reduce the number of goods or units of service and reduce the payments accordingly;

5.6.3. Offer reductions in funding as an alternative to Contract termination; or

5.6.4. Cancel the Contract.

## **6. Contract Changes**

6.1. **Amendments, Purchase Orders and Change Orders.** This Contract is issued under the authority of the Procurement Officer who signed this Contract. The Contract may be modified only through a Contract Amendment, Purchase Order and/or Change Order within the scope of the Contract, unless the change is administrative or otherwise permitted by the Special Terms and Conditions. Changes to the Contract, including the addition of work or materials, the revision of payment terms, or the substitution of work or materials, directed by an unauthorized State employee or made unilaterally by the Contractor are violations of the Contract and of applicable law. Such changes, including unauthorized Contract Amendments, Purchase Orders and/or Change Orders, shall be void and without effect, and the Contractor shall not be entitled to any claim under this Contract based on those changes.

6.2. **Subcontracts.** The Contractor shall not enter into any subcontract under this Contract without the advance written approval of the Procurement Officer. The subcontract shall incorporate by reference all material and applicable terms and conditions of this Contract.

6.3. **Assignments and Delegation.** The Contractor shall not assign any right nor delegate any duty under this Contract without the prior written approval of the Procurement Officer. The State shall not unreasonably withhold approval.

## **7. Risk and Liability**

7.1. **Risk of Loss.** The Contractor shall bear all loss of conforming material covered under this Contract until received and accepted by authorized personnel at the location designated in the Purchase Order, Change Order or Contract. Mere receipt does not constitute final acceptance. The risk of loss for nonconforming

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materials shall remain with the Contractor regardless of receipt.

7.2. Mutual Indemnification. Each party (as "indemnitor") agrees to indemnify, defend and hold harmless the other party (as "indemnitee") from and against any and all claims, losses, liability, costs or expenses (including reasonable attorney's fees) (hereinafter collectively referred to as "claims") arising out of bodily injury of any person (including death) or property damage, but only to the extent that such claims, which result in vicarious/derivative liability to the indemnitee, are caused by the act, omission, negligence, misconduct, or other fault of the indemnitor, its officers, officials, agents, employees or volunteers.

7.3. Force Majeure.

7.3.1. Liability and Definition. Except for payment of sums due, neither party shall be liable to the other nor deemed in default under this Contract if and to the extent that such party's performance of this Contract is prevented by reason of force majeure. The term "force majeure" means an occurrence that is beyond the control of the party affected and occurs without its fault or negligence. Without limiting the foregoing, force majeure includes acts of God; acts of the public enemy; acts of terrorism; war; riots; strikes; mobilization; labor disputes; civil disorders; fire; flood; lockouts; injunctions-interventions not caused by or resulting from the act or failure to act of the parties; failures or refusals to act by government authority not caused by or resulting from the act or failure to act of the parties; and other similar occurrences beyond the control of the party declaring force majeure, which such party is unable to prevent by exercising reasonable diligence.

7.3.2. Exclusions. Force Majeure shall not include the following occurrences:

7.3.2.1. Late delivery of Materials caused by congestion at a manufacturer's plant or elsewhere, or an oversold condition of the market;

7.3.2.2. Late performance by a subcontractor unless the delay arises out of a force majeure occurrence in accordance with this force majeure term and condition; or

7.3.2.3. Inability of either the Contractor or any subcontractor to acquire or maintain any required insurance, bonds, licenses or permits.

7.3.3. Notice. If either party is delayed at any time in the progress of the work by force majeure, the delayed party shall notify the other party in writing of such delay, as soon as is practicable and no later than the following working day of the commencement thereof, and shall specify the causes of such delay in such notice. Such notice shall be delivered or mailed certified-return receipt and shall make a specific reference to this article, thereby invoking its provisions. The delayed party shall cause such delay to cease as soon as practicable and shall notify the other party in writing when it has done so. The time of completion shall be extended by Contract Amendment for a period of time equal to the time that the results or effects of such delay prevent the delayed party from performing in accordance with this Contract.

7.3.4. Default. Any delay or failure in performance by either party hereto shall not constitute default hereunder or give rise to any claim for damages or loss of anticipated profits if, and to the extent that, such delay or failure is caused by force majeure.

7.4. Third Party Antitrust Violations. The Contractor assigns to the State any claim for overcharges resulting from antitrust violations to the extent that those violations concern materials or services supplied by third parties to the Contractor for or toward the fulfillment of this Contract.

**8. Description of Materials** The following provisions shall apply to Materials only:

8.1. Liens. The Contractor agrees that the Materials supplied under this Contract are free of liens. In the event the Materials are not free of liens, Contractor shall pay to remove the lien and any associated damages or replace the Materials with Materials free of liens.



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- 8.2. Quality. Unless otherwise modified elsewhere in these terms and conditions, the Contractor agrees that, for one year after acceptance by the State of the Materials, they shall be:
  - 8.2.1. Of a quality to pass without objection in the Contract description;
  - 8.2.2. Fit for the intended purposes for which the Materials are used;
  - 8.2.3. Within the variations permitted by the Contract and are of even kind, quantity, and quality within each unit and among all units;
  - 8.2.4. Adequately contained, packaged and marked as the Contract may require; and
  - 8.2.5. Conform to the written promises or affirmations of fact made by the Contractor.
- 8.3. Inspection/Testing. Subparagraphs 8.1 through 8.2 of these paragraphs are not affected by inspection or testing of or payment for the Materials by the State.
- 8.4. Compliance With Applicable Laws. The Materials and services supplied under this Contract shall comply with all applicable federal, state and local laws, and the Contractor shall maintain all applicable license and permit requirements.
- 8.5. Survival of Rights and Obligations After Contract Expiration and Termination.
  - 8.5.1. Contractor's Representations. All representations and warranties made by the Contractor under this Contract in paragraphs 7 and 8 shall survive the expiration or termination hereof. In addition, the parties hereto acknowledge that pursuant to A.R.S. § 12.510, except as provided in A.R.S. § 12-529, the State is not subject to or barred by any limitations of actions prescribed in A.R.S. Title 12, Chapter 5.
  - 8.5.2. Purchase Orders and Change Orders. Unless otherwise directed in writing by the Procurement Officer, the Contractor shall fully perform and shall be obligated to comply with all Purchase Orders and Change Orders received by the Contractor prior to the expiration or termination hereof, including, without limitation, all Purchase Orders and Change Orders received prior to but not fully performed and satisfied at the expiration or termination of this Contract.

**9. State's Contractual Remedies**

- 9.1. Right to Assurance. If the State, in good faith, has reason to believe that the Contractor does not intend to, or is unable to, perform or continue performing under this Contract, the Procurement Officer may demand in writing that the Contractor give a written assurance of intent to perform. Failure by the Contractor to provide written assurance within the number of Days specified in the demand may, at the State's option, be the basis for terminating the Contract.
- 9.2. Stop Work Order.
  - 9.2.1. Terms. The State may, at any time, by written order to the Contractor, require the Contractor to stop all or any part of the work called for by this Contract for a period up to ninety (90) Days after the order is delivered to the Contractor, and for any further period to which the parties may agree. The order shall be specifically identified as a stop work order issued under this clause. Upon receipt of the order, the Contractor shall immediately comply with its terms and take all reasonable steps to minimize the incurrence of costs allocable to the work covered by the order during the period of work stoppage.
  - 9.2.2. Cancellation or Expiration. If a stop work order issued under this clause is canceled or the period of the order or any extension expires, the Contractor shall resume work. The Procurement Officer shall make an equitable adjustment in the delivery schedule or Contract price, or both, and the Contract

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shall be amended in writing accordingly.

- 9.3. Non-exclusive Remedies. The rights and remedies of ADHS under this Contract are not exclusive, and ADHS is entitled to all rights and remedies available to it, including those under the Arizona Uniform Commercial Code and Arizona common law.
- 9.4. Right of Offset. The State shall be entitled to offset against any sums due the Contractor in any Contract with the State or damages assessed by the State because of the Contractor's non-conforming performance or failure to perform this Contract. The right to offset may include, but is not limited to, a deduction from an unpaid balance and a collection against the bid and/or performance bonds. Any offset taken for damages assessed by the State shall represent a fair and reasonable amount for the actual damages and shall not be a penalty for non-performance.

## 10. Contract Termination

- 10.1. Cancellation for Conflict of Interest. Pursuant to A.R.S. § 38-511, the State may cancel this Contract within three (3) years after Contract execution without penalty or further obligation if any person significantly involved in initiating, negotiating, securing, drafting or creating the Contract on behalf of the State is, or becomes at any time while the Contract or an extension of the Contract is in effect, an employee of or a consultant to any other party to this Contract with respect to the subject matter of the Contract. The cancellation shall be effective when the Contractor receives written notice of the cancellation, unless the notice specifies a later time. If the Contractor is a political subdivision of the State, it may also cancel this Contract as provided in A.R.S. § 38-511.
- 10.2. Gratuities. The State may, by written notice, terminate this Contract, in whole or in part, if the State determines that employment or a Gratuity was offered or made by the Contractor or a representative of the Contractor to any officer or employee of the State for the purpose of influencing the outcome of the procurement, securing the Contract or an Amendment to the Contract, or receiving favorable treatment concerning the Contract, including the making of any determination or decision about Contract performance. The State, in addition to any other rights or remedies, shall be entitled to recover exemplary damages in the amount of three times the value of the Gratuity offered by the Contractor.
- 10.3. Suspension or Debarment. The State may, by written notice to the Contractor, immediately terminate this Contract if the State determines that the Contractor or its subcontractor has been debarred, suspended or otherwise lawfully prohibited from participating in any public procurement activity, including but not limited to, being disapproved as a subcontractor of any public procurement unit or other governmental body.
- 10.4. Termination Without Cause.
  - 10.4.1. Both the State and the Contractor may terminate this Contract at any time with thirty (30) days' notice in writing specifying the termination date. Such notices shall be given by personal delivery or by certified mail, return receipt requested.
  - 10.4.2. If the Contractor terminates this Contract, any monies prepaid by the State, for which no service or benefit was received by the State, shall be refunded to the State within 5 days of the termination notice. In addition, if the Contractor terminates the Contract, the Contractor shall indemnify the State for any sanctions imposed by the funding source as a result of the Contractor's failure to complete the Contract.
  - 10.4.3. If the State terminates this Contract pursuant to this Section, the State shall pay the Contractor the Contract price for all Services and Materials completed up to the date of termination. In a fixed price contract, the State shall pay the amount owed for the Services or Materials by multiplying the unit of service or item cost by the number of unpaid service units or items. In a cost reimbursement contract, the ADHS shall pay for any costs that the Contractor can document as having been paid by the Contractor and approved by ADHS. In addition, the Contractor will be paid its reasonable actual costs for work in progress as determined by GAAP up to the date of termination. Upon such termination,

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the Contractor shall deliver to the ADHS all deliverables completed. ADHS may require Contractor to negotiate the terms of any remaining deliverables still due.

- 10.5. Mutual Termination. This Contract may be terminated by mutual written agreement of the parties specifying the termination date and the terms for disposition of property and, as necessary, submission of required deliverables and payment therein.
- 10.6. Termination for Default. The State reserves the right to terminate the Contract in whole or in part due to the failure of the Contractor to comply with any material obligation, term or condition of the Contract, to acquire and maintain all required insurance policies, bonds, licenses and permits, or to make satisfactory progress in performing the Contract. In the event the ADHS terminates the Contract in whole or in part as provided in this paragraph, the ADHS may procure, upon such terms and in such manner as deemed appropriate, Services or Materials, similar to those terminated, and Contractor shall be liable to the ADHS for any excess costs incurred by the ADHS in obtaining such similar Services or Materials.
- 10.7. Continuation of Performance Through Termination. Upon receipt of the notice of termination and until the effective date of the notice of termination, the Contractor shall perform work consistent with the requirements of the Contract and, if applicable, in accordance with a written transition plan approved by the ADHS. If the Contract is terminated in part, the Contractor shall continue to perform the Contract to the extent not terminated. After receiving the notice of termination, the Contractor shall immediately notify all subcontractors, in writing, to stop work on the effective date of termination, and on the effective date of termination, the Contractor and subcontractors shall stop all work.
- 10.8. Disposition of Property. Upon termination of this Contract, all property of the State, as defined herein, shall be delivered to the ADHS upon demand.

**11. Arbitration**

Pursuant to A.R.S. § 12-1518, disputes under this Contract shall be resolved through the use of arbitration when the case or lawsuit is subject to mandatory arbitration pursuant to rules adopted under A.R.S. § 12 -133.

**12. Communication**

- 12.1. Program Report. When reports are required by the Contract, the Contractor shall provide them in the format approved by ADHS.
- 12.2. Information and Coordination. The State will provide information to the Contractor pertaining to activities that affect the Contractor's delivery of services, and the Contractor shall be responsible for coordinating their activities with the State's in such a manner as not to conflict or unnecessarily duplicate the State's activities. As the work of the Contractor progresses, advice and information on matters covered by the Contract shall be made available by the Contractor to the State throughout the effective period of the Contract.

**13. Client Grievances**

If applicable, the Contractor and its subcontractors shall use a procedure through which clients may present grievances about the operation of the program that result in the denial, suspension or reduction of services provided pursuant to this Contract and which is acceptable to and approved by the State.

**14. Sovereign Immunity**

Pursuant to A.R.S. § 41-621(O), the obtaining of insurance by the State shall not be a waiver of any sovereign immunity defense in the event of suit.

**15. Administrative Changes**

The Procurement Officer, or authorized designee, reserves the right to correct any obvious clerical, typographical

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or grammatical errors, as well as errors in party contact information (collectively, “Administrative Changes”), prior to or after the final execution of a Contract or Contract Amendment. Administrative Changes subject to permissible corrections include: misspellings, grammar errors, incorrect addresses, incorrect Contract Amendment numbers, pagination and citation errors, mistakes in the labeling of the rate as either extended or unit, and calendar date errors that are illogical due to typographical error. The Procurement Office shall subsequently send to the Contractor notice of corrections to administrative errors in a written confirmation letter with a copy of the corrected Administrative Change attached.

**16. Survival of Terms After Termination or Cancellation of Contract**

All applicable Contract terms shall survive and apply after Contract termination or cancellation to the extent necessary for Contractor to complete and for the ADHS to receive and accept any final deliverables that are due after the date of the termination or cancellation.

**17. Health Insurance Portability and Accountability Act of 1996 (HIPAA)**

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.

**18. Comments Welcome**

The ADHS Procurement Office periodically reviews the Uniform Terms and Conditions and welcomes any comments you may have. Please submit your comments to: ADHS Procurement Administrator, Arizona Department of Health Services, 150 North 18<sup>th</sup> Avenue, Suite 280, Phoenix, Arizona 85007.

**19. Data Universal Numbering System (DUNS) Requirement**

For federal funding, pursuant to 2 CFR 25.100 et seq., no entity (defined as a Governmental organization, which is a State, local government, or Indian tribe; foreign public entity; domestic or foreign nonprofit organization; domestic or foreign for-profit organization; or Federal agency, but only as a subrecipient under an award or subaward to a non-Federal entity) may receive a subaward from ADHS unless the entity provides its Data Universal Numbering System (DUNS) Number to ADHS.

**20. The Federal Funding Accountability and Transparency Act (FFATA or Transparency Act - P.L.109-282, as amended by section 6202(a) of P.L. 110-252), found at <https://www.frs.gov/>**

If applicable, the subrecipient or sub-awardee is required to abide by the Federal Funding Accountability and Transparency Act (FFATA or Transparency Act – P.L. 109-282, as amended by section 6202(a) of P.L. 110-252),

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found at <https://www.fsr.gov/>. The associated Grant Reporting Certification Form and completion instructions will be sent to the subrecipient from ADHS Program(s) responsible for the specific contract. The subrecipient or sub-awardee must return the completed form to ADHS Program(s) by the 15<sup>th</sup> of the month following that in which the award was received. Failure to complete a required Grant Reporting Certification Form may result in loss of funding.

**21. 2 CFR §200.216 PROHIBITION ON CERTAIN TELECOMMUNICATIONS AND VIDEO SURVEILLANCE SERVICES OR EQUIPMENT**

21.1. Recipients and sub-recipients are prohibited from obligating or expanding loan or grant funds to:

21.1.1. Procure or obtain;

21.1.2. Extend or renew a contract to procure or obtain; or

21.1.3. Enter in a contract (or extend or renew a contract) to procure or obtain equipment, services, or system that uses covered telecommunications equipment or services as a substantial or essential component of any system, or as critical technology as part of any system. As described in Public Law 115-232, section 889, covered telecommunications equipment is telecommunications equipment produced by Huawei Technologies Company or ZTE Corporation (or any subsidiary or affiliate of such entities).

21.1.3.1. For the purpose of public safety, security of government facilities, physical security surveillance of critical infrastructure, and other national security purposes, video surveillance and telecommunications equipment produced by Hytera Communications Corporation, Hangzhou Hikvision Digital Technology Company, or Dahua Technology Company (or any subsidiary or affiliate of such entities).

21.1.3.2. Telecommunications or video surveillance services provided by such entities or using such equipment.

21.1.3.3. Telecommunications or video surveillance equipment or services produced or provided by an entity that the Secretary of Defense, in consultation with the Director of the National Intelligence or the Director of the Federal Bureau of Investigation, reasonably believes to be an entity owned or controlled by, or otherwise connected to, the government of a covered foreign country.

**22. Technology Replacement**

In any event where product is discontinued, no longer available or technically inferior to newly developed product, the Contractor shall provide an equivalent replacement model at no additional cost and shall honor the original contract terms

**23. Authorization for Provision of Services**

Authorization for purchase of services under this Agreement shall be made only upon ADHS issuance of a Purchase Order that is signed by an authorized agent. The Purchase Order will indicate the Agreement number and the dollar amount of the funds authorized. The Contractor shall only be authorized to perform services up to the amount of 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 2) the Purchase Order is changed or modified with an official ADHS Procurement Change Order, and/or an additional Purchase Order is issued for purchase of services under this Agreement.

**Additional Terms and Conditions for Title 2, Subtitle A, Chapter II, Part 200, Subpart C: §200.201 USE OF GRANT AGREEMENTS (INCLUDING FIXED AMOUNT AWARDS), COOPERATIVE AGREEMENTS AND CONTRACT**

**24. CIVIL RIGHTS ASSURANCE STATEMENT.** The Contractor and Subcontractors are subject to Title VI of the Civil

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Rights Act of 1964, Section 504 of Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act of 1990, the Age Discrimination Act of 1975, Title IX of the Education Amendment of 1972, and offers all persons the opportunity to participate in programs or activities regardless of race, color, national origin, age, sex, or disability. Further, it is agreed that no individual will be turned away from or otherwise denied access to or benefit from any program or activity that is directly associated with a program of the RECIPIENT on the basis of race, color, national origin, age, sex (in educational activities) or disability.

**25. AMERICANS WITH DISABILITIES ACT OF 1990.**

- 25.1 The Contractor shall comply with the Americans With Disabilities Act of 1990 (Public Law 101-336) and the Arizona Disability Act of 1992 (A.R.S § 41-1492 et. seq.), which prohibits discrimination on the basis of physical or mental disabilities in delivering contract services or in the employment, or advancement in employment of qualified individuals.
- 25.2 Persons with a disability may request a reasonable accommodation, such as a sign language interpreter, by contracting the Contract Manager for the solicitation. Request should be made as early as possible to allow time to arrange the accommodation.

**26. FEDERAL FUNDING.** Funding for these services is contingent upon the availability of federal government funding. No commitment of any kind is made by the State concerning this Grant unless there are monies provided by a federal grant. The Grantee should take this fact into consideration.

- 26.1 For the purposes of this Grant, a capital expenditure means expenditures to acquire capital assets, as defined in 2 C.F.R. 200.12, or expenditures to make additions, improvements, modifications, replacements, rearrangements, reinstallations, renovations, or alterations to capital assets that materially increase their value or useful life, with a cost of \$250 or greater.
- 26.2 Grantee agrees to maintain property records for equipment purchased with grant funds and perform a physical inventory and reconciliation with property records at least every year. Grantee agrees that funds will not be used for the construction of new facilities.
- 26.3 Grantee agrees to follow equipment disposition policies as determined by the Federal Awarding Agency at Award Completion or as depicted in the State of Arizona Accounting Manual. Grantee also agrees to follow the directives in ADHS Property and Procedure Policy FIN 111.
- 26.4 Charges to Federal awards for salaries and wages must be based on records that accurately reflect the work performed. These records must: Be supported by a system of internal control which provides reasonable assurance that the charges are accurate, allowable, and properly allocated; Be incorporated into the official records of the non-Federal entity; Reasonably reflect the total activity for which the employee is compensated by the non-Federal entity, not exceeding 100% of compensated activities (for IHE, this per the IHE's definition of IBS); Encompass both federally assisted and all other activities compensated by the non-Federal entity on an integrated basis, but may include the use of subsidiary records as defined in the non-Federal entity's written policy; Comply with the established accounting policies and practices of the non-Federal entity (See paragraph above for treatment of incidental work for IHEs.); and Support the distribution of the employee's salary or wages among specific activities or cost objectives if the employee works on more than one Federal award; a Federal award and non-Federal award; an indirect cost activity and a direct cost activity; two or more indirect activities which are allocated using different allocation bases; or an unallowable activity and a direct or indirect cost activity. Budget estimates (i.e., estimates determined before the services are performed) alone do not qualify as support for charges to Federal awards, but may be used for interim accounting purposes only.
- 26.5 Grantee understands that financial reports are required as an accounting of expenditures for either reimbursement or ADHS-approved advance payments.
- 26.6 The final request for reimbursement of grant funds must be received by the ADHS no later than sixty (60) days after the last day of the award period.

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- 26.7 All goods and services must be received or have reasonable expectations thereof and placed in service by Grantee by the expiration of this award.
- 26.8 Grantee agrees that all encumbered funds must be expended and that goods and services must be paid by GRANTEE within sixty (60) days of the expiration of this award unless funding guidelines permit funds to be used at a future date.
- 26.9 Grantee agrees to remit all unexpended grant funds to the ADHS within thirty (30) days of written request from the ADHS.
- 26.10 Grantee agrees to account for interest earned on federal grant funds and shall manage interest income in accordance with the Cash Management Improvement Act of 1990 and as indicated in the State of Arizona Accounting Manual (SAAM) located at the following website. <https://gao.az.gov/publications/saam> Interest earned in excess of allowable limits must be remitted to the ADHS within thirty (30) days after receipt of a written request from the ADHS.
- 26.11 Grantee agrees not to use grant funds for food and/or beverage unless explicitly approved in writing by the ADHS.
- 26.12 Grantee agrees to comply with all applicable laws, regulations, policies and guidance (including specific cost limits, prior approvals and reporting requirements, where applicable) governing the use of grant funds for expenses related to conferences, meetings, trainings, and other events, including the provision of food and/or beverages at such events, and costs of attendance at such events unless explicitly approved in writing by the ADHS.
- 26.13 No funds shall be used to supplant federal, state, county or local funds that would otherwise be made available for such purposes. Supplanting means the deliberate reduction of state or local funds because of the existence of any grant funds.
- 26.14 Grantee agrees that grant funds are not to be expended for any indirect costs that may be incurred by Grantee for administering these funds unless explicitly approved in writing by the ADHS. This may include, but is not limited to, costs for services such as accounting, payroll, data processing, purchasing, personnel, and building use which may have been incurred by the Grantee.
- 26.15 Grantee will comply with the audit requirements of OMB Office of Management and Budget's (OMB) Uniform Administrative Requirements, Cost Principles and Audit Requirement for Federal Awards and provide the ADHS with the Single Audit Report and any findings within ninety (90) days of receipt of such finding(s). If the report contains no findings, the Grantee must provide notification that the audit was completed. All completed Single Audits should be uploaded in the format specified to the Federal Audit Clearinghouse no later than nine months after the entities fiscal year-end at the attached Link: <https://harvester.census.gov/facweb/default.aspx/>
- 26.16 Grantee understands and agrees that misuse of award funds may result in a range of penalties, including suspension of current and future funds, suspension or debarment from federal grants, recoupment of monies provided under an award, and civil and/or criminal penalties.
- 26.17 Grantee agrees not to do business with any individual, agency, company or corporation listed in the Excluded Parties Listing Service.

Link: System for Award Management <https://www.sam.gov/portal/public/SAM/>

- 26.18 Grantee agrees to ensure that, no later than the due date of the Grantee's first financial report after the award is made, Grantee and any subgrantees have a valid DUNS profile and active registration with the System for Award Management (SAM) database.

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- 26.19 GRANTEE certifies that it presently has no financial interest and shall not acquire any financial interest, direct or indirect, which would conflict in any manner or degree with the performance of services required under this Agreement.
- 26.20 Compliance with 41 U.S.C. 4712 (including prohibitions on reprisal; notice to employees) Grantee must comply with, and is subject to, all applicable provisions of 41 U.S.C. 4712, including all applicable provisions that prohibit, under specified circumstances, discrimination against an employee as reprisal for the employee's disclosure of information related to gross mismanagement of a federal grant, a gross waste of federal funds, an abuse of authority relating to a federal grant, a substantial and specific danger to public health or safety, or a violation of law, rule, or regulation related to a federal grant.
- 26.21 GRANTEE certifies to comply with the Drug-Free Workplace Act of 1988, and implemented in 28 CFR Part 83, Subpart F, for grantees, as defined in 28 CFR, Part 83 Sections 83.620 and 83.650.



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## 1. Background

- 1.1 The Arizona Department of Health Services (ADHS) has a long-standing commitment to addressing health disparities and advancing health equity. ADHS has an Office of Health Equity that includes dedicated staff to support these efforts. Additionally, the Arizona Health Improvement Plan (AzHIP) recognizes health equity as the foundation of improving health in Arizona and is one of five health priorities;
- 1.2 The COVID-19 Pandemic and its impacts have touched the lives of all Arizona residents. Underserved communities and populations have been disproportionately placed at higher risk by the COVID-19 pandemic, especially those individuals in rural, medically underserved, and/or racial and ethnic minority groups. These groups are at higher risk of exposure, infection, hospitalization and mortality. Coupled with known disproportionate rates of chronic diseases, this has increased the severity of COVID-19 infections. These populations also experience challenges in accessing testing, treatment and vaccinations against COVID-19;
- 1.3 The Center for Disease Control (CDC) recently awarded ADHS a two (2)-year, non-competitive grant titled: **National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Populations and Rural Communities**. Funding was made available through the Consolidated Appropriations Act and the Coronavirus Response and Relief Supplement Appropriations Act, 2021 (P.L. 116-260, Section 2, Division M);
- 1.4 Coronavirus Disease 2019 (COVID-19) Funds: A recipient of a grant or cooperative agreement awarded by the Department of Health and Human Services (HHS) with funds made available under the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (P.L. 116-123); the Coronavirus Aid, Relief, and Economic Security Act, 2020 (the "CARES Act") (P.L. 116-136); the Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139); the Consolidated Appropriations Act and the Coronavirus Response and Relief Supplement Appropriations Act, 2021 (P.L. 116-260) and/or the American Rescue Plan of 2021 (P.L. 117-2) agrees, as applicable to the award, to: 1) comply with existing and/or future directives and guidance from the Secretary regarding control of the spread of COVID-19; 2) in consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care regardless of the individual's home jurisdiction and/or appropriate public health measures (e.g., social distancing, home isolation); and 3) assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation. In addition, to the extent applicable, Recipient will comply with Section 18115 of the CARES Act, with respect to the reporting to the HHS Secretary of results of tests intended to detect SARS-CoV-2 or to diagnose a possible case of COVID-19. Such reporting shall be in accordance with guidance and direction from HHS and/or CDC. HHS laboratory reporting guidance is posted at: <https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf>. Further, consistent with the full scope of applicable federal grant regulations (45 C.F.R. 75.322), the purpose of this award, and the underlying funding, the recipient is expected to provide to CDC copies of and/or access to COVID-19 data collected with these funds, including but not limited to data related to COVID-19 testing. CDC will specify in further guidance and directives what is encompassed by this requirement. This award is contingent upon agreement by the recipient to comply with existing and future guidance from the HHS Secretary regarding control of the spread of COVID-19. In addition, recipient is expected to flow down these terms to any subaward, to the extent applicable to activities set out in such subaward;
- 1.5 ADHS, with our partners, will implement the grant's four (4) overarching strategies:
  - 1.5.1 Expand existing and/or develop new mitigation and prevention resources and services to reduce COVID-19 related disparities among populations at higher risk and that are underserved,
  - 1.5.2 Increase/ improve data collection and reporting for populations experiencing a disproportionate burden of COVID-19 infection, severe illness, and death to guide the response to the COVID-19 pandemic,

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1.5.3 Build, leverage, and expand infrastructure support for COVID-19 prevention and control among populations that are at higher risk and underserved, and

1.5.4 Mobilize partners and collaborators to advance health equity and address social determinants of health as they related to COVID-19 health disparities among populations at higher risk and that are underserved.

1.6 By strengthening existing partnerships with local health department leaders and community-based organizations, and establishing new partnerships, the ADHS will focus its work in rural counties where residents have poorer health outcomes, higher uninsured rates, less access to health and social services, higher disparities in chronic diseases, infection, hospitalization and deaths related to COVID-19, especially among American Indian, Latino, African American, communities with disabilities, low socio-economic, and older adult populations.

## 2. Purpose

2.1 The purpose of this intergovernmental agreement (IGA) is to leverage partnerships between ADHS, Local Health Departments and Statewide Partners by providing **CDC COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities** funding to support the implementation of the four (4) overarching strategies identified in this CDC grant. This IGA is intended to provide support to the unique needs of local communities identifies by local health departments and statewide partners and approved strategies described in respective work plans and budgets;

2.2 The intended outcomes of this grant funding are:

2.2.1 Reduced COVID-19 related health disparities,

2.2.2 Improved and increased testing and contact tracing among populations at higher risk and that are underserved, including racial and ethnic minority groups and people living in rural communities, and

2.2.3 Improved state, local, US territorial and freely associated state health department capacity and services to prevent and control COVID-19 infection (or transmission) among populations at higher risk and that are underserved, including racial and ethnic minority groups and people living in rural communities.

## 3. Objectives

The Contractor shall, through local health departments and statewide partners, implement one or more of the following strategies:

3.1 Expand existing and/or develop new mitigation and prevention resources and services to reduce COVID-19 related disparities among populations at higher risk and that are underserved;

3.2 Increase/improve data collection and reporting for populations experiencing a disproportionate burden of COVID-19 infection, severe illness, and death to guide the response to the COVID-19 pandemic;

3.3 Build, leverage, and expand infrastructure support for COVID-19 prevention and control among populations that are at higher risk and underserved; and/or

3.4 Mobilize partners and collaborators to advance health equity and address social determinants of health as they relate to COVID-19 health disparities among populations at higher risk and that are underserved.

## 4. Scope of Work

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4.1 This contract offers four (4) overarching strategies designed to reduce the burden of COVID-19 in rural and racial/ ethnic communities, including African American, Latino, and Indigenous and Native American people, Asian American and Pacific Islanders, and other people of color, and other disadvantaged or marginalized groups, including members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) people; people with disabilities; people over the age of 65, and people otherwise adversely affected by persistent poverty or inequality; to advance health equity and address social determinants of health. Contingent upon available funding, local health departments and statewide partners are expected to implement strategies and activities in response to local needs for mitigation, prevention resources and services to reduce COVID-19 disparities; and

4.2 Contractor shall implement activities identified in, approved and agreed upon in the two (2)-year budget plans and two (2)-year work plans that align and support the overarching strategies to reduce the burden of COVID-19:

4.2.1 Exhibit A - Two (2) Year Work Plan.

**5. Tasks**

ADHS shall provide technical assistance and support to local health departments and statewide partners on quarterly reports and other reporting requirements as defined and required by the CDC:

- 5.1. Develop, submit and implement approved and agreed upon two (2)-year budget;
- 5.2. Implement the approved and agreed upon two (2)-year work plan (Exhibit A) with identified strategies and actions by the end of the two (2)-year grant period;
- 5.3. Participate in all calls (monthly, bi-monthly, quarterly and ad hoc), technical assistance calls, webinars, meetings, training and scheduled site visits (as needed);
- 5.4. Participate in the development of a shared comprehensive evaluation plan and report out on any performance measures related to the implementation of their activities (process and/or intermediate), or as defined by the funding source;
- 5.5. Complete tagging and inventory of equipment in compliance with the policy of the [State of Arizona Accounting Manual](#) (SAAM)
  - 5.5.1. Stewardship <https://gao.az.gov/sites/default/files/2535%20Stewardship%20190304.pdf>
  - 5.5.2. Submit documents to the COVID-19 Health Equity Coordinator/ Program Manager pertaining to the asset (ie., receiving papers, invoice, purchase order, receipts, etc.), and
  - 5.5.3. Documents shall include the make, model, serial number, and acquisition date of the asset.
- 5.6. Ensure that all out-of-state travel language follows the travel and per diem policies as outlined in the [State of Arizona Accounting Manual](#):
  - 5.6.1 Travel Responsibilities: <https://gao.az.gov/sites/default/files/5009%20Traveler%20Responsibilities%20Draft%20200113.pdf>, and
  - 5.6.2 Travel Reimbursement Rates: <https://gao.az.gov/sites/default/files/5095%20Reimbursement%20Rates%20%20190102%20a.pdf>.
- 5.7 Comply with all federal reporting requirements; and

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5.8 Timely submission of Quarterly Progress Reports.

## 6. Funding Restrictions

Funds cannot be used for any of the following: (CDC per Notice of Funding Opportunity for this grant)

6.1 Restrictions that must be considered while planning the programs and writing the budget are:

6.1.1 Recipients may not use funds for research,

6.1.2 Recipients may not use funds for clinical care except as allowed by law, and

6.1.3 Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.

6.2 Generally, recipients may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget;

6.3 Reimbursement of pre-award costs generally is not allowed, unless the CDC provides written approval to the recipient;

6.4 Other than for normal and recognized executive-legislative relationships, funds may not be used for:

6.4.1 Publicity or propaganda purposes,

6.4.2 The preparation, distribution, or use of any materials designed to support or defeat the enactment of legislation before any legislative body, and

6.4.3 The salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.

6.5 See [Additional Requirement \(AR\) 12](#) for detailed guidance on this prohibition and [additional guidance on lobbying for CDC recipients](#).

6.6 The direct and primary recipient in a cooperative agreement must program a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.

## 7. Approvals

7.1 The quarterly reports, work plans, budget workbook, and monthly Contractor Expenditure Reports (CER) with receipts supporting expenditures billed for in-state and out-of-state travel and equipment purchases or \$250 or more, as required and/or requested, shall be submitted and approved by ADHS prior to payment reimbursement;

7.2 Upon approval of Work Plan, any changes to the approved activities or strategies must be resubmitted to ADHS for review and approval prior to implementation;

7.3 Any requests to provide additional information on expenditure reports and quarterly progress reports;

7.4 All marketing materials (use of ADHS logo, brochures, posters, public service announcements, paid media, videos, etc.) which have been developed, written, published, recorded by the local health departments and/or statewide partners and paid for funds from this award must be first approved by ADHS prior to the dissemination of such materials or airing or use of such announcement;

<b>CONTRACT NUMBER</b>	<b>INTERGOVERNMENTAL AGREEMENT</b>
<b>CTR055990</b>	<b>SCOPE OF WORK</b>

- 7.5 Any evaluation or study to be conducted that involves human subjects must be approved by ADHS prior to conducting, and have prior approval (as applicable); and
- 7.6 Request approval in writing to the ADHS COVID-19 Health Equity Officer for purchases of single items of capital equipment at or above the purchase price of five thousand dollars (\$5,000.00):
  - 7.6.1 Requests can be made via email and shall include the following information:
    - 7.6.1.1 Type of equipment requesting to be purchased,
    - 7.6.1.2 Cost of equipment, and
    - 7.6.1.3 How the proposed purchase supports the current approved scope of work and work plan.

**8. ADHS Responsibilities**

- 8.1 Review, feedback, and approval of the two (2) year work plan within thirty (30) days of submission;
- 8.2 Review, feedback, and approval of the Budgets Workbooks, CERs and supporting documentation within thirty (30) days of submission;
- 8.3 Feedback, technical assistance, and training to support the approved work plan, budget, quarterly reporting, and supporting documentation;
  - 8.3.1 Samples of evidence-based and/or evidence-informed strategies and supporting resources,
  - 8.3.2 A Quarterly Reporting template,
  - 8.3.3 A Work Plan template,
  - 8.3.4 Budget Workbook and CER templates,
- 8.4 Access to virtual technical assistance and guidance from ADHS staff, local health department peers/mentors, statewide partners, and subject matter experts related to the strategies for which the contractor has received funding, and
- 8.5 Coordinate and conduct annual Contractor site visits, as needed.

**9. Deliverables**

- 9.1 Two (2) year work plan as submitted and approved;
- 9.2 Contractor Expenditure Report (CER) to ADHS, due thirty (30) days following each month of services;
- 9.3 Receipts supporting expenses billed for any in-state/out-of-state travel and equipment purchases of \$250 or more are to also be submitted;
- 9.4 Upon request from ADHS, all receipts supporting expenses billed for a selected CER shall be submitted for review;
- 9.5 Written Quarterly Progress Reports, due 60 days into the contract and at the end of each fiscal quarter thereafter through the performance/budget period (which would be July 31, 2021; October 31, 2021; January 31, 2022; April 30, 2022; July 31, 2022; October 31, 2022; January 31, 2023; and April 30, 2023);
- 9.6 A final CER invoice no later than thirty (30) days following the end of each contract year;

<b>CONTRACT NUMBER</b>	<b>INTERGOVERNMENTAL AGREEMENT</b>
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- 9.7 Two (2) year budget workbook as submitted and approved for the grant budget period (June 1, 2021-September 30, 2023)
- 9.8 Submit monthly CERs (Attachment A) and maintain sufficient documentation in the form of receipts in support of expense incurred for any purchases that are being claimed for reimbursement;
- 9.9 Supporting documentation shall be kept by the Contractor and does not need to be submitted with CERs with the exception of travel documentations (In-state and out-of-state) and single purchases of equipment exceeding \$250;
- 9.10 Documentation supporting all expenses being billed shall be provided as requested by ADHS;
- 9.11 Provide the COVID-19 Health Equity Coordinator/Program Manager with contract information of all program staff funded under this IGA/ Contract within thirty (30) days of contract execution to include:
  - 9.11.1 Name, title, email, phone, and
  - 9.11.2 Program area assigned.
- 9.12 Submit to the COVID-19 Health Equity Coordinator/ Program Manager all staffing and programmatic changes within fifteen (15) days providing all information outline in section 10.11;
- 9.13 Transfer budget exceeding twenty-five percent (25%) of total budget;
- 9.14 Request to transfer budget amount between line items, exceeding twenty-five percent (25%) of total budget or to a non-funded line item, will require a revised budget be submitted to the COVID-19 Health Equity Coordinator/ Program Manager and a contract amendment issued by ADHS Procurement; and
- 9.15 Submit brochures, posters, public service announcements, paid media, videos, sponsorships, etc. to be paid for with funds from this contract prior to development and use.

**10. State Provided Items**

ADHS shall provide:

- 10.1 Attachment A – Contractor Expenditure Report (CER);
- 10.2 Attachment B – Line Item Budget Move Tool;
- 10.3 Exhibit A – Two (2)-Year Work Plan; and
- 10.4 Quarterly Report Template (to be provided after execution of contract)

**11. Notices, Correspondence, Reports and Invoices**

- 11.1 Notices, correspondence, reports, supporting documentation and CERs from the contractors to ADHS shall be sent to:

Arizona COVID-19 Health Equity Coordinator/ Program Manager  
Arizona Department of Health Services  
150 N. 18<sup>th</sup> Avenue  
Email: TBD

Invoices shall be emailed to: [invoices@azdhs.gov](mailto:invoices@azdhs.gov) with a cc to the COVID-19 Health Equity Coordinator/ Program Manager Email: TBD

<b>CONTRACT NUMBER</b>	<b>INTERGOVERNMENTAL AGREEMENT SCOPE OF WORK</b>
<b>CTR055990</b>	

11.2 Notices, Correspondence, Reports and Payment from ADHS to the Contractor shall be sent to:

Cochise Health & Social Services  
Attn: Alicia Thompson  
1415 W. Melody Lane, Building A  
Bisbee, AZ 85603  
Phone: (520) 432-9400  
Email: [athompson@cochise.az.gov](mailto:athompson@cochise.az.gov)

<b>CONTRACT NUMBER</b>	<b>INTERGOVERNMENTAL AGREEMENT PRICE SHEET</b>
<b>CTR055990</b>	

**COVID-19 Health Disparities Grant  
Arizona Department of Health Services  
Cochise County  
June 1, 2021 – May 31, 2023**

<b>ACCOUNT CLASSIFICATION</b>	<b>TOTAL</b>
Personnel	\$475,650.00
ERE	\$171,234.00
Professional & Outside Services	\$2,244,940.00
Travel	\$8,370.00
Occupancy	\$0.00
Other Operating Expense	\$61,500.00
Capital Outlay	\$0.00
Indirect	\$207,319.00
<b>TOTAL</b>	<b>\$3,169,013.00</b>

The Contractor is authorized to transfer up to a maximum of twenty-five percent (25%) of the total budget amount between line items. Transfers exceeding twenty-five percent (25%) or to a non-funded line item shall require an amendment.



<b>CONTRACT NUMBER</b>	<b>CONTRACTOR'S EXPENDITURE REPORT ATTACHMENT A</b>
CTR055990	

<b>Arizona Department of Health Services</b> Accounting / Contracts 150 N 18th Avenue Phoenix, Arizona 85007	<b>CONTRACTOR'S EXPENDITURE REPORT (CER)</b> 1. Invoice Number _____ 2. Contract Number _____ 3. Program Identifier / Vendor Name _____ 4. Purchase Order - GAE Number _____ 5. Reporting Period _____	<input type="checkbox"/> Cost Reimbursement - Cumulative Actual <input type="checkbox"/> Fixed Price  <input type="checkbox"/> Periodic Report <input type="checkbox"/> Final Report
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**Detailed Statement of Expenditures, Fixed Price and Match Requirements**

6. COST REIMBURSEMENT (Actual Expenditures)	Approved Initial Budget	Date of Approved Budget Amendment	Approved Amended Budget	Prior Reporting Period YTD Expenditures	Current Reporting Period Expenditures	Total YTD Expenditures
<b>A. Account Classification:</b>						
Personal Services	\$ -		\$ -	\$ -	\$ -	\$ -
ERE	\$ -		\$ -	\$ -	\$ -	\$ -
Professional & Outside Services	\$ -		\$ -	\$ -	\$ -	\$ -
Travel	\$ -		\$ -	\$ -	\$ -	\$ -
Occupancy	\$ -		\$ -	\$ -	\$ -	\$ -
Other Operating	\$ -		\$ -	\$ -	\$ -	\$ -
Capital Outlay	\$ -		\$ -	\$ -	\$ -	\$ -
Indirect Cost	\$ -		\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>\$ -</b>		<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

7. FIXED PRICE (Deliverables)	Rate Per Unit	Number of Units Provided This Reporting Period	Total Funds Earned This Reporting Period	Prior Reporting Period - YTD Funds Earned	Total YTD Funds Earned
<b>A. Type of Unit: (Insert Below)</b>					
	\$ -	0	\$ -	\$ -	\$ -
	\$ -	0	\$ -	\$ -	\$ -
	\$ -	0	\$ -	\$ -	\$ -
	\$ -	0	\$ -	\$ -	\$ -
	\$ -	0	\$ -	\$ -	\$ -
	\$ -	0	\$ -	\$ -	\$ -
<b>Total</b>		<b>0</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

8. Match Expenditures (Actual Expenditures)	Prior Reporting Period YTD Expenditures	Current In-Kind Match Expenditures	Current Cash Match Expenditures	Total YTD Match Expenditures
<b>A. Account Classification: (Insert type of match below)</b>				
	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -
<b>Total</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

ADHS USE ONLY	THIS SECTION FOR ADHS FINANCE USE ONLY	AMOUNT	CONTRACTOR CERTIFICATION																																										
I certify this report has been examined by me, and to the best of my knowledge and belief, the expenses noted are appropriate and reasonable. I also confirm the reported expenditures for fixed price information is valid, based on a review of supporting records. The sub recipient is in compliance with the terms of the contract which allows the program to approve and pay this CER invoice.  <b>ADHS PROGRAM CERTIFICATION:</b> <input type="checkbox"/> Performance Satisfactory For Payment <input type="checkbox"/> Performance Unsatisfactory, Withhold Payment <input type="checkbox"/> No Payment Due	Total Expenditures / Total Fixed Price	\$ -	I certify that this report has been examined by me, and to the best of my knowledge and belief, the reported expenditures and fixed price information are allowable, valid, based upon our official accounting records (book of account) and consistent with the terms of the contract. It is also understood that the contract payments are calculated by the Department of Health Services based upon information provided in this report.																																										
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	Less: Year-to-Date Payments	\$ -																																											
	Adj (if required):	\$ -																																											
	Net Payment Due:	\$ -																																											
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<b>CONTRACT NUMBER</b>	<b>LINE ITEM BUDGET MOVE TOOL ATTACHMENT B</b>
CTR055990	

**BUDGET LINE ITEM MOVES**

*Note: This document is provided only for the contractor to use to assist with tracking budget line item moves to determine if/when a contract amendment needs to be requested.*

<b>Revised Budget Per 25% Movement Between Line Items</b>						
<i>(Budget moves exceeding 25% of total annual budget or to a non-fund line item will require a contract amendment.)</i>						
Account Classification	Approved Contract Budget	Total Budget Change 00/00/00	Total Budget Change 00/00/00	Total Budget Change 00/00/00	Revised Budget *	% of Budget Change
Personnel Services					\$0.00	#DIV/0!
ERE					\$0.00	#DIV/0!
Professional & Outside Services					\$0.00	#DIV/0!
Travel Expenses					\$0.00	#DIV/0!
Occupancy Expense					\$0.00	#DIV/0!
Other Operating Expenses					\$0.00	#DIV/0!
Indirect					\$0.00	#DIV/0!
<b>Total</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!
<b>Total Amount &amp; Percentage of Movement Request</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!

CONTRACT NUMBER	<b>TWO (2) YEAR WORK PLAN EXHIBIT A</b>
CTR055990	

<b>Cochise County Health and Social Services</b>	<b>\$3,169,013</b>
1415 W. Melody Ln, Bisbee, AZ 85603	
<b>Method of Selection:</b> Intergovernmental Agreement between Public Entities	
<b>Period of Performance:</b> 24 months (estimated June 1, 2021-May 31, 2023)	
<p><b>Summary of Proposed Work:</b> Cochise County Health and Social Services (CCHSS) will: 1. Partner with the two organizations that provide services to the homeless population in Cochise County to reduce the impact of COVID-19 among socially-vulnerable Cochise County homeless residents. 2. Partner with one organization to improve access to telehealth services for specialty and behavioral health care for residents in rural areas of Cochise County, many of whom are low-income, immigrants and/or speak a language other than English at home and/or farmworkers. 3. Use Community Health Workers (CHWs) and culturally and linguistically appropriate communication materials to enhance personal and organizational health literacy and achieve system and policy change that reduces COVID-19 impacts among socially-vulnerable Cochise County Hispanic/Latino residents. CCHSS will fund: the Arizona Community Health Workers Association (AzCHOW) (\$750,000) to assist with hire and train 5 additional Community Health Workers (CHWs) to serve target communities in Cochise County and recruit and train CHWs to embed in partner organizations; SE Arizona Area Health Education Center (SEAHEC) &amp; the Arizona Prevention Research Center (AzPRC) - Evaluation (\$424,940) to provide training on CLAS standards for medical and partner organization personnel; Chiricahua Community Health Centers, Inc. (CCHCI) (\$458,000) to expand CHW workforce at its clinic and train CHWs and other staff in COVID-specific CLAS competencies; Winchester Heights Health Organization (WHHO) (\$335,00) to expand and enhance its Promotores de Salud (CHW) services provided to farmworkers, farming and ranching families, and owners of agricultural businesses to mitigate impact of COVID-19 among farmworkers; Pinal Hispanic Council (PHC) (\$277,000) to promote COVID-19-specific health literacy among their behavioral health services clients (mental health and substance use disorder).</p>	
<p><b>Method of Accountability:</b> The Finance and Contract Specialist will be responsible for contract management and contractor oversight; ensuring the scope of work and all deliverables are completed by Cochise County Health and Social Services for payment of invoices for service. Quarterly progress reports will be required.</p>	

<b>CONTRACT NUMBER</b>	<b>TWO (2) YEAR WORK PLAN EXHIBIT A</b>
<b>CTR055990</b>	

**Strategy 1**

<b>Activity 4 Title</b>	Cochise County: Community Health Worker (CHW) integration into homeless shelters and veterans associations		
<b>Activity Focus</b>	Vaccine administration support		
<b>Other Activity Focus (if applicable)</b>			
<b>Racial and Ethnic Population(s) of Focus (Select all that apply)</b>	Hispanic, Latino or Latinx	<b>Describe the Racial and Ethnic Population(s) (if applicable)</b>	
<b>Other Population(s) of Focus (Select all that apply)</b>	People experiencing homelessness	<b>Describe the Rural Community Served (if applicable)</b>	
<b>Other Population (if applicable)</b>			
<b>Estimated Reach of Population(s) of Focus</b>	18,217 (Veteran population in Cochise County), Estimated 21,000 Cochise County residents living in poverty		
<b>Geographic Area</b>	Both		
<b>Setting</b>	Community-based organization		
<b>Other Setting (if applicable)</b>			

Activity Description	Contributing Partners	Partner Type	Other Partner	Key Contracts & Consultants	Key	Start Date	End Date
ADHS will fund Cochise County Health and Social Services, a local health department in Southeastern Arizona on the US-México border, to partner with two organizations that provide services to the homeless population in Cochise County to develop and implement this activity. The goal of this activity is to reduce the impact of COVID-19 on socially-vulnerable Cochise County homeless residents. Two Community Health Workers(CHWs)/Promotores de Salud will be hired and trained to provide education to members of the target population. The CHWs will each be assigned to work directly with each partner organization. This activity will utilize two key approaches to increase both personal and organizational health literacy to reduce disparities in achievement of Healthy People 2030 objectives HC/HIT-01, HC/HIT-02 and HC/HIT-03, in order to improve adherence to COVID-19 public health practices: 1. A statewide CHW Association (AzCHOW) will train and mobilize the CHWs to help the homeless to access and understand health information to mitigate COVID-19 and its social impacts. 2. The Southeast Arizona Area Health Education Center (SEAHEC) will promote understanding of and application of the National Culturally and Linguistically Appropriate Service (CLAS) Standards through best practice and system/policy change with partner organizations.	Cochise County Health & Social Services	Local governmental agencies and community leaders		ADHS is providing funding to Cochise County Health & Social Services to lead this and other activities; Cochise County Health & Social Services is contracting with AzCHOW, SEAHEC, UArizona Prevention Research Center (AzPRC) to implement this activity.	Increased understanding of health information (HIT/HC 01-04) Increased Service Utilization E-documentation (IID-DO2) Improved Communication (HIT/HC 01-01,2,3).	6/1/21	5/31/23
	Good Neighbor Alliance	Non-governmental organization	Homeless Shelter				
	Bisbee Coalition for the Homeless	Non-governmental organization	Homeless Shelter				
	AzCHOW	Health-related organizations (e.g., pharmacies, testing centers, community health workers)					
	SEAHEC	Non-governmental organization					
	UA Prevention Research Center (AzPRC)	Academic institutions					

<b>Activity 5 Title</b>	Cochise County: Rural Telehealth Incubator Project of Southeast Arizona		
<b>Activity Focus</b>	Evidence-based policies, systems, and environmental strategies to address COVID-19		
<b>Other Activity Focus (if applicable)</b>			
<b>Racial and Ethnic Population(s) of Focus (Select all that apply)</b>	Hispanic, Latino or Latinx	<b>Describe the Racial and Ethnic Population(s) (if applicable)</b>	One third of Cochise County residents are Hispanic/Latino. Many first or second generation Mexican Americans and many farmworkers from México are attracted to the area. Douglas and Willcox residents are 74% and 35% Hispanic/Latino respectively. Nearly one third of county residents speak a language other than English at home, meaning that they lack English Language Proficiency. In the Douglas and Willcox areas, 65% and 30% of residents speak Spanish at home. 26% to 16% of the target population lives in poverty and 38% to 19% of children under age 12 live in poverty. Limited education is a social determinant in the Douglas, Willcox and Bisbee/Naco areas, where 14% to 7% of adults have less than a 9th grade education. Unemployment is high across the board, ranging from 30% in Douglas to a low of 11% in Bisbee, which is the county government seat and major source of employment. The percentage of residents without health insurance in 2020 was highest in Douglas and Willcox areas, possibly due a greater number of undocumented Hispanic/Latino residents and migrant farmworkers.
<b>Other Population(s) of Focus (Select all that apply)</b>	People living in rural areas	<b>Describe the Rural Community Served (if applicable)</b>	Cochise County is a rural, agricultural area that straddles the US-México border with two ports of entry in Douglas and Naco. Cochise County scores 0.9302 on the Social Vulnerability Index, with 1.0 being the most vulnerable. The target service areas rank very high on the CDC Social Vulnerability Index (SVI) – mostly in the Top 4th for each of the four vulnerability themes that represent 15 risk factors.
<b>Other Population (if applicable)</b>			
<b>Estimated Reach of Population(s) of Focus</b>	This initiative will provide great access to both rural and urban areas, but targets rural communities in four areas of Cochise County. This initiative will provide access to both rural and urban areas, but targets rural communities in four areas of Cochise County. The total county population is 131,694 and the estimated population of the composite service area is 72,357.		
<b>Geographic Area</b>	Both		

<b>CONTRACT NUMBER</b>	<b>TWO (2) YEAR WORK PLAN</b>
<b>CTR055990</b>	<b>EXHIBIT A</b>

<b>Setting</b>	Community-based organization									
<b>Other Setting (if applicable)</b>										
<b>Activity Description</b>	<b>Contributing Partners</b>	<b>Partner Type</b>	<b>Other Partner</b>	<b>Key Contracts &amp; Consultants</b>	<b>Key</b>	<b>Start Date</b>	<b>End Date</b>			
<p>Access to care, especially culturally competent behavioral health and specialty care, is limited in rural Cochise County. Life-saving healthcare is disproportionately harder to access for residents in Cochise County. This activity aims to develop a community telehealth facility, available to all providers, to allow their patients to access specialty and behavioral health care. The vision is to provide a Rural Telehealth Care Center where providers can schedule specialty visits for their patients. Individual provider offices cannot afford the cost of telehealth equipment. This Rural Telehealth Care Center will provide a space where all providers in our area can schedule telehealth visits for their patients. An example is the provider with a burn patient who needs specialty consultation with a burn specialist who is in Salt Lake City. The provider can arrange for his/her patient to see the specialist at the Rural Telehealth Care Center. Many patients in rural Arizona live in areas with limited broadband and internet access which means they cannot attend telehealth meetings from home. Patients will travel to Sierra Vista and attend their specialty visits at the Rural Telehealth Care Center. We anticipate these visits will be for medical and behavioral health concerns, however, should additional requests come from other provider types we will be open to them as well. Lastly, patients who do not have access to broadband or the technology needed for a telehealth visit can use the center as well. Being in a rural community access to healthcare can be a challenge. If the patient has a healthcare provider outside of the County – they can use the center for their telehealth visits. This Center not only helps with specialty referrals but also with patients who may not have a provider in the area.</p>	Cochise County Health and Social Services	Local governmental agencies and community leaders		<p>ADHS will fund Cochise County Health and Social Services to lead this activity. They plan to contract with Arizona Regional Economic Development Foundation (AREDF) to implement this activity.</p>	<p>Procurement of telehealth equipment; Recruitment of community organizations and providers to utilize the service; Hiring of an Registered Nurse (RN) Coordinator for program; Increased service utilization; Increased e-documentation (IID-DO2)</p>	6/1/21	5/31/23			
	Arizona Regional Economic Development Foundation	Community-based and civic organizations								

<b>Activity 6 Title</b>	Cochise County: Salud para Nuestra Gente (Health for Our People) Initiative								
<b>Activity Focus</b>	Evidence-based policies, systems, and environmental strategies to address COVID-19								
<b>Other Activity Focus (if applicable)</b>	Social Determinants of Health / Health Literacy / National CLAS Standards								
<b>Racial and Ethnic Population(s) of Focus (Select all that apply)</b>	Hispanic, Latino or Latinx	<b>Describe the Racial and Ethnic Population(s) (if applicable)</b>		One third of Cochise County residents are Hispanic/Latino. Many first or second generation Mexican Americans and many farmworkers from México are attracted to the area. Douglas and Willcox residents are 74% and 35% Hispanic/Latino respectively.					
<b>Other Population(s) of Focus (Select all that apply)</b>	People living in rural areas	<b>Describe the Rural Community Served (if applicable)</b>		Nearly one third of county residents speak a language other than English at home, meaning that they lack English Language Proficiency. In the Douglas and Willcox areas, 65% and 30% of residents speak Spanish at home. 26% to 16% of the target population lives in poverty and 38% to 19% of children under age 12 live in poverty. Limited education is a social determinant in the Douglas, Willcox and Bisbee/Naco areas, where 14% to 7% of adults have less than a 9th grade education. Unemployment is high across the board, ranging from 30% in Douglas to a low of 11% in Bisbee, which is the county government seat and major source of employment. The percentage of residents without health insurance in 2020 was highest in Douglas and Willcox areas, possibly due a greater number of undocumented Hispanic/Latino residents and migrant farmworkers.					
<b>Other Population (if applicable)</b>									
<b>Estimated Reach of Population(s) of Geographic Area</b>	The Salud para Nuestra Gente (Health for Our People) Initiative will target rural communities in four areas of Cochise County. Cochise County is a rural, agricultural area that straddles the US-México								
<b>Setting</b>	Community-based organization								
<b>Other Setting (if applicable)</b>									
<b>Activity Description</b>	<b>Contributing Partners</b>	<b>Partner Type</b>	<b>Other Partner</b>	<b>Key Contracts &amp; Consultants</b>	<b>Key</b>	<b>Start Date</b>	<b>End Date</b>		
<p>The goal of the Salud para Nuestra Gente Initiative is to enhance personal and organizational health literacy and achieve system and policy change to reduce COVID-19 impacts among socially-vulnerable Cochise County Hispanic/Latino residents. The project goal will be collaboratively achieved through seven objectives:</p> <p>Objective 1 – By September 30, 2021, activity partners will develop a Disparity Impact Statement that further defines the target population to be served and why.</p> <p>Objective 2 – By October 31, 2021, activity partners will develop a Health Literacy and Sustainability</p>	Cochise County Health and Social Services	Local governmental agencies and community leaders		<p>ADHS will fund Cochise County Health and Social Services (CCHSS) to lead this activity. CCHSS plans to partner with Chiricahua Community Health Centers, Inc. (CCHCI), Winchester Heights Health Organization (WHHO), Pinal</p>	<p>Increased understanding of health information (HIT/HC 01-04) Improved Communication (HIT/HC 01-</p>	06/01/21	05/31/23		
	Arizona CHW Association (AzCHOW)	Non-governmental organization							
	Chiricahua Community Health Centers, Inc. (CCHCI)	Rural health clinics and critical access hospitals	FQHC						

<b>CONTRACT NUMBER</b>	<b>TWO (2) YEAR WORK PLAN</b>
<b>CTR055990</b>	<b>EXHIBIT A</b>

Plan as a roadmap for project implementation:

Objective 3 - By June 30, 2023 20 Community Health Workers/CHWs (Promotores de Salud) will be trained to provide education to promote and support among 400 members of the target population.

Objective 4 - By December 31, 2022, twenty-five (25) health care providers will be trained to embrace the National CLAS Standards and relevant Healthy People 2030 Objectives in their provision of care, including with individuals who have limited English proficiency.

Objective 5 - By January 31, 2022, ten (10) CHWs will be incorporated into care teams in fulfillment of cultural and linguistic competence per the National CLAS Standards and relevant HP 2030 Objectives.

Objective 6 - By May 31, 2023, activity partners will have achieved at least three system or policy changes in Cochise County that will sustain organizational health literacy in support of personal health literacy.

Objective 7 - Beginning January 1, 2022, activity partners will apply monitoring for quality improvement (QI) and sustainability of health literacy efforts among the target population in the target geographic area. A statewide CHW Association (AzCHOW) will train and mobilize CHWs to help community residents access and understand health information to mitigate COVID-19 and its social impacts. The local AHEC will promote understanding of and application of the National CLAS Standards through best practice and system/policy change.

Winchester Heights Health Organization (WHHO)	Health-related organizations (e.g., pharmacies, testing centers, community health workers)		Hispanic Council (PHC), AzCHOW, AzPRC, and SEAHEC to implement this activity.	01,2,3). Increased Service Utilization E-documentation (IID-DO2)		
Pinal Hispanic Council (PHC)	Healthcare providers					
SEAHEC	Academic institutions					
UArizona Prevention Research Center (AzPRC)	Academic institutions					

<b>CONTRACT NUMBER</b>	<b>2 CFR 200.332</b>
<b>CTR055990</b>	<b>EXHIBIT B</b>

**§ 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:**

**Arizona Department of Health Services**

**DUNS #**

**804745420**

Federal Award Identification (Grant Number):

1 NH75OT000005-01-00

Subrecipient name (which must match the name associated with its unique entity identifier):

Cochise County Health and Social Services

Subrecipient's unique entity identifier (DUNS #):

179281282

Federal Award Identification Number (FAIN, sometimes it's the same as the Grant Number):

NH75OT000005

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;

05/26/2021

Subaward Period of Performance Start and End Date;

6/1/2021 - 5/30/2023

Subaward Budget Period Start and End Date:

6/1/2021 - 5/30/2023

Amount of Federal Funds Obligated by this action by the pass-through entity to the subrecipient (this is normally the contract amount):

\$3,169,013.00

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):

\$33,866,454.00

Total Amount of the Federal Award committed to the subrecipient by the pass-through entity

\$34,603,661.00

Federal award project description, as required to be responsive to the Federal Funding Accountability and Transparency Act (FFATA)

Covid-19 Health Disparities

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 (CDC)

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:

93.391

Identification of whether the award is R&D

No

Indirect cost rate for the Federal award (including if the de minimis rate is charged) per § 200.414

6.54%