



UTAH DEPARTMENT OF HEALTH & HUMAN SERVICES CONTRACT AMENDMENT

PO Box 144003, Salt Lake City, Utah 84114
288 North 1460 West, Salt Lake City, Utah 84116

2022606
Department Log Number

202700508
State Contract Number

1. **CONTRACT NAME:** The name of this contract is San Juan County - Disease Response, Evaluation, Analysis and Monitoring 2019 Amendment 3.
2. **CONTRACTING PARTIES:** This contract amendment is between the Utah Department of Health & Human Services (DEPARTMENT) and San Juan County (CONTRACTOR).

PAYMENT ADDRESS

San Juan County
735 S 200 W, Ste 2
Blanding UT, 84511

MAILING ADDRESS

San Juan County
735 S 200 W, Ste 2
Blanding UT, 84511

Vendor ID: 06866HL

Commodity Code: 99999

3. **PURPOSE OF CONTRACT AMENDMENT:** The purpose of this amendment is to increase the contract amount and replace Attachment "A" in exchange for continued services.
4. **CHANGES TO CONTRACT:**

1. The contract amount is being changed. The original contract amount was \$17,518.00. The funding amount will be increased by \$4,741.00 in federal funds. New total funding is \$22,259.00

2. Attachment "A", effective August 1, 2022, is replacing Attachment "A", which was effective August 2021.. The document title is changed. Article "I" is changed, Article "II" Definitions is changed and Section F, is changed, Article "III" Funding is changed and Section A, is changed and Subsections 1.f), 2.f), 3.f) and 4.b) are added, Article "IV" Invoicing is changed, Article "V" Department Contact is changed, and Section B, is deleted, Article "VI" Responsibilities of Subrecipient is changed, and Sections A.4, and A.5, are added, Sections B.4, and B.5, are deleted, Section C.7, is added, Section D.2, is changed and Section D.5, is deleted Article "VII" Optional Activities is changed, and Sections B, C, and D, are deleted, Article "VIII" Reports is changed, Article "IX" Amendments and Termination is added, and Article "C" Required Disclosures for Federal Awardee Performance and Integrity Information System is added.

UEI: WCVABP2FEVA2

Indirect Cost Rate: 0%

Add

Federal Program Name:	Epidemiology and Laboratory Capacity	Award Number:	5 NU50CK000536-04-00
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	for Infectious Diseases (ELC)		
Name of Federal Awarding Agency:	US Department of Health and Human Services	Federal Award Identification Number:	NU50CK000536
Assistance Listing:	EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)	Federal Award Date:	7/8/2022
Assistance Listing Number:	93.323	Funding Amount:	\$2679.00

Add

Federal Program Name:	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	Award Number:	5 NU50CK000536-04-00
Name of Federal Awarding Agency:	US Department of Health and Human Services	Federal Award Identification Number:	NU50CK000536
Assistance Listing:	EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)	Federal Award Date:	7/8/2022
Assistance Listing Number:	93.323	Funding Amount:	\$696.00

Add

Federal Program Name:	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	Award Number:	5 NU50CK000536-04-00
Name of Federal Awarding Agency:	US Department of Health and Human Services	Federal Award Identification Number:	NU50CK000536
Assistance Listing:	EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)	Federal Award Date:	7/8/2022
Assistance Listing Number:	93.323	Funding Amount:	\$696.00

Add

Federal Program Name:	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	Award Number:	5 NU50CK000536-04-00
Name of Federal Awarding Agency:	US Department of Health and Human Services	Federal Award Identification Number:	NU50CK000536
Assistance Listing:	EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)	Federal Award Date:	7/8/2022
Assistance Listing Number:	93.323	Funding Amount:	\$670.00

All other conditions and terms in the original contract and previous amendments remain the same.

5. EFFECTIVE DATE OF AMENDMENT: This amendment is effective 08/01/2022
6. DOCUMENTS INCORPORATED INTO THIS CONTRACT BY REFERENCE BUT NOT ATTACHED:
 - A. All other governmental laws, regulations, or actions applicable to services provided herein.
 - B. All Assurances and all responses to bids as provided by the CONTRACTOR.
 - C. Utah Department of Health & Human Services General Provisions and Business Associate Agreement currently in effect until 6/30/2023.
7. This contract, its attachments, and all documents incorporated by reference constitute the entire agreement between the parties and supersedes all prior written or oral agreements between the parties relating to the subject matter of this contract.

Contract with Utah Department of Health & Human Services and San Juan County, Log # 2022606

IN WITNESS WHEREOF, the parties enter into this agreement.

CONTRACTOR

STATE

By: _____
Willie Grayeyes Date
County Commission Chair

By: _____
Tracy Gruber Date
Executive Director, Department
of Health & Human Services

Attachment A: Special Provisions
San Juan County - Disease Response, Evaluation, Analysis and Monitoring 2019
Amendment 3
Effective Date: August 1, 2022

I. GENERAL PURPOSE:

- A. The general purpose of this contract is to provide cross-cutting epidemiology/outbreak response and capacity for infectious diseases such as prion and vaccine preventable diseases.

II. DEFINITIONS:

- A. "AFM" means Acute Flaccid Myelitis.
- B. "CJD" means Creutzfeldt-Jakob disease.
- C. "EpiTrax" means State of Utah disease reporting system.
- D. "Subrecipient" means Contractor and San Juan County.
- E. "UPHL" means Utah Public Health Laboratory.
- F. "Department" means Department of Health and Human Services, Disease Response, Evaluation Analysis and Monitoring.

III. FUNDING:

- A. New total funding is \$22,259.00.
 - 1. For Cross-Cutting Epidemiology/Outbreak Response.
 - a) \$2,720.00 for the period August 1,2019 to July 31, 2020.
 - b) \$2,720.00 for the period August 1,2020 to July 31, 2021.
 - c) Funding reduced by \$1,200.00 for the period August 1, 2019 to July 31, 2020.
 - d) \$6,135.00 for the period August 1,2021 to July 31, 2022.
 - e) \$2,679.00 for the period August 1,2022 to July 31, 2023.
 - 2. For Prion disease.
 - a) \$680.00 for the period August 1,2019 to July 31, 2020.
 - b) \$680.00 for the period August 1,2020 to July 31, 2021.
 - c) Funding reduced by \$680.00 for the period August 1, 2019 to July 31, 2020.
 - d) Funding reduced by \$680.00 for the period August 1, 2020 to July 31, 2021.
 - e) \$2,068.00 for the period August 1,2021 to July 31, 2022.
 - f) \$696.00 for the period August 1,2022 to July 31, 2023.
 - 3. For Vaccine Preventable diseases.
 - a) \$707.00 for the period August 1,2019 to July 31, 2020.
 - b) \$707.00 for the period August 1,2020 to July 31, 2021.
 - c) Funding reduced by \$707.00 for the period August 1, 2019 to July 31, 2020.

- d) Funding reduced by \$707.00 for the period August 1, 2020 to July 31, 2021.
 - e) \$2,122.00 for the period August 1, 2021 to July 31, 2022.
 - f) \$696.00 for the period August 1, 2022 to July 31, 2023.
 - 4. For Vaccine Preventable disease – Industry & Occupation.
 - a) \$2,953.00 for the period August 1, 2021 to July 31, 2022.
 - b) \$670.00 for the period August 1, 2022 to July 31, 2023.
 - B. This is a Cost Reimbursement contract. The DEPARTMENT agrees to reimburse the SUBRECIPIENT up to the maximum amount of the contract for expenditures made by the SUBRECIPIENT directly related to the program.
 - C. The Federal funds provided under this agreement are from the Federal Program and award as recorded on Page 1 of the contract.
 - D. Pass-through Agency: Utah Department of Health.
 - E. Number assigned by the Pass-through Agency: State Contract Number, as recorded on Page 1 of the Contract.

IV. INVOICING:

- A. In addition to the General Provisions of the contract the SUBRECIPIENT shall include one column for each funding source in the Monthly Expenditure Report;
 - 1. The SUBRECIPIENT shall submit the June invoice, no later than July 15 and the July invoice, no later than September 30 of each year.
- B. The SUBRECIPIENT shall include the following columns and report expenditures within each column in the Monthly Expenditure Report.
 - 1. Cross-Cutting Epi/Outbreak Response;
 - 2. Prion disease;
 - 3. Vaccine Preventable disease;
 - 4. Vaccine Preventable disease – Industry & Occupation.

V. DEPARTMENT CONTACT:

- A. The day-to-day operations and dispute contact is: Cindy Burnett, cburnett@utah.gov, (801) 538-6692.

VI. RESPONSIBILITIES OF SUBRECIPIENT:

- A. For Cross-Cutting Epidemiology/Outbreak Capacity the SUBRECIPIENT shall:
 - 1. Maintain epidemiology staff sufficient to investigate and respond to outbreaks within the SUBRECIPIENT's jurisdiction;
 - 2. Comply with Disease Plans/Case Report Forms and Disease Reporting (<https://epi.health.utah.gov/plans-and-reports-a-list/>) and Centers for Disease Control and Prevention guidance for conditions found at (https://epi.health.utah.gov/wp-content/uploads/2021/12/Rpt_Disease_List_2021.pdf);
 - 3. Enter investigation findings in EpiTrax;

4. Maintain epidemiology staff sufficient to investigate and respond to outbreaks within the SUBRECIPIENT's jurisdiction;
 5. Optional Activities:
 - a. Detect, investigate, and respond to outbreaks;
 - b. Assist the DEPARTMENT in obtaining information on products that may be the source of an outbreak;
 - c. Collect and ship outbreak specimens to UPHL.
- B. For Prion disease the SUBRECIPIENT shall:
1. Maintain epidemiology staff sufficient to investigate suspect and confirmed cases of Creutzfeldt-Jakob disease reported within the SUBRECIPIENTs jurisdiction;
 2. Investigate all reported suspect or confirmed cases of prion disease and complete EpiTrax Case Mortality Rates (CMR);
 3. Discuss autopsy to confirm CJD diagnosis, connect patients with NPDPS and work with UDHHS to coordinate testing.
- C. For Vaccine Preventable diseases, the SUBRECIPIENT shall:
1. Investigate reportable vaccine-preventable disease cases and outbreaks including; diphtheria, measles, mumps, rubella, meningococcal disease, H influenzae, pertussis, S. pneumoniae, tetanus, and MIS-C;
 2. Collect and enter case data, key and enhanced variable data, etc. into EpiTrax;
 3. Work with the DEPARTMENT to ensure that all *Neisseria meningitidis* isolates from normally sterile site are sent to UPHL for serogroup/serotype confirmation testing;
 4. Work with the DEPARTMENT to ensure that all *Haemophilus influenzae* isolates from normally sterile sites are sent to UPHL for serogroup/serotype confirmation testing;
 5. Work with the DEPARTMENT to investigate and complete target variables for severe or hospitalized cases of varicella;
 6. Collaborate with the DEPARTMENT to improve the completeness of Vaccine Preventable Disease data such as, hospitalization, mortality status, vaccination status, clinical information, etc.
 7. Investigate suspect cases of AFM by communicating with medical providers, laboratories and other partners, reviewing clinical information and submitting investigation forms to the DEPARTMENT;
 - a. Case investigation may be deferred to the DEPARTMENT.
 - b. For AFM Cases, the SUBRECIPIENT may:
 - (1) Conduct six to 12 month follow up on confirmed and probably cases of AFM cases using a standardized questionnaire. Case investigate may be deferred to the DEPARTMENT.

- (2) Work with the DEPARTMENT to ensure that all AFM specimens are sent to UPHL.

D. For Vaccine Preventable diseases – Industry & Occupation, the SUBRECIPIENT shall:

1. Assign a lead person to this project, and provide the name of the individual to the DEPARTMENT. If there are changes, the DEPARTMENT shall be notified;
2. Attend no less than one training session with the DEPARTMENT by July 31 of each year when offered by DEPARTMENT;
3. When possible, collect occupation and/or industry data while conducting case investigations for infectious diseases and report to EpiTrax;
4. Attend a workgroup meeting if DEPARTMENT makes available.

VII. OPTIONAL ACTIVITIES:

A. For staff training the SUBRECIPIENT may:

1. Participate in training on activities directly related to this contract.

VIII. REPORTS:

A. For staff training, the SUBRECIPIENT shall:

1. Submit a report to the DEPARTMENT no later than 30-days after the training;
2. Include the following items in the report:
 - a. The employee name(s);
 - b. Name/description of the training attended;
 - c. Date of training;
 - d. Registration fee or tuition cost, if applicable;
 - e. Identify which of the following topics were covered by the training; epidemiologic methods, statistical methods, outbreak investigation and/or infectious diseases.

IX. AMENDMENTS AND TERMINATION:

A. If the Contract is not amended to add funds, the Contract shall terminate as of July 31, 2023.

X. REQUIRED DISCLOSURES FOR FEDERAL AWARDEE PERFORMANCE AND INTEGRITY INFORMATION SYSTEM:

A. Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the

prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grant Services
Bakia Parrish, Grants Management Specialist
Centers for Disease Control and Prevention
Branch 1
2939 Flowers Road, MS-TV-2 Atlanta, GA 30341
Email: BParrish@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosure, Intake Coordinator
330 Independent Avenue
SW Cohen Building, Room 5527
Washington, DC 20201
Fax: (202) 205-0604 (Include "Mandatory Grant Disclosures" in subject line) or
Email: MandatoryGranteeDisclosures@oig.hhs.gov