



UTAH DEPARTMENT OF HEALTH CONTRACT AMENDMENT

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

1931112
Department Log Number

192700359
State Contract Number

1. **CONTRACT NAME:** The name of this contract is 2019-2023 EPICC- San Juan Health Department Amendment 5.
2. **CONTRACTING PARTIES:** This contract amendment is between the Utah Department of Health (DEPARTMENT) and San Juan County (CONTRACTOR).
3. **PURPOSE OF CONTRACT AMENDMENT:** To add funding for FY21, update funding dates for FY21, adjust coding, and update contract activities in special provisions.
4. **CHANGES TO CONTRACT:**
 1. Adding funding of \$17,764.14 to PBG federal grant for FY21. Adding funding of \$9,174.12 to 1807 federal grant for FY21. Adding funding of \$27,200.00 to 1817 federal grant for FY21. New total contract amount is \$186,894.78.
 2. Update activities for PBG, 1807 and 1817 federal grants.

DUNS: 079815014

Indirect Cost Rate: 0%

Add

Federal Program Name:	DHHS-PHS-CDC	Award Number:	NB01OT009323-01-00
Name of Federal Awarding Agency:	Centers for Disease Control and Prevention	Federal Award Identification Number:	NB01OT009323
CFDA Title:	PREVENTION BLOCK GRANT	Federal Award Date:	8/7/2020
CFDA Number:	93.991	Funding Amount:	\$17764.14

Add

Federal Program Name:	DHHS-PHS-CDC	Award Number:	5 NU58DP006496-3-00
Name of Federal Awarding Agency:	Centers for Disease Control and Prevention	Federal Award Identification Number:	5 NU58DP006496
CFDA Title:	UTAH STATE PHYSICAL ACTIVITY AND NUTRITION PROGRAM	Federal Award Date:	7/10/2020
CFDA Number:	93.439	Funding Amount:	\$9174.12

Add

Federal Program Name:	DHHS-PHS-CDC	Award Number:	5 NU58DP006609-03-00
Name of Federal Awarding Agency:	Centers for Disease Control and Prevention	Federal Award Identification Number:	5 NU58DP006609
CFDA Title:	INNOVATIVE STATE AND LOCAL PUBLIC HEALTH STRATEGIES TO PREVENT AND MANAGE DIABETES AND HEART DISEASE AND STROKE	Federal Award Date:	6/21/2020
CFDA Number:	93.435	Funding Amount:	\$13600.00

Add

Federal Program Name:	DHHS-PHS-CDC	Award Number:	5 NU58DP006609-03-00
Name of Federal Awarding Agency:	Centers for Disease Control and Prevention	Federal Award Identification Number:	5 NU58DP006609
CFDA Title:	INNOVATIVE STATE AND LOCAL PUBLIC HEALTH STRATEGIES TO PREVENT AND MANAGE DIABETES AND HEART DISEASE AND STROKE	Federal Award Date:	6/21/2020
CFDA Number:	93.435	Funding Amount:	\$13600.00

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

5. EFFECTIVE DATE OF AMENDMENT: This amendment is effective 09/30/2020

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 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 and San Juan County, Log # 1931112

IN WITNESS WHEREOF, the parties enter into this agreement.

CONTRACTOR

STATE

By: _____
Kenneth Maryboy Date
County Commission Chair

By: _____
Shari A. Watkins, C.P.A. Date
Director, Office Fiscal Operations

**Attachment A - Special Provisions – 9/1/2020
San Juan County Health Department FY21 PBG-1807-1815-1817**

Healthy Living Through Environment, Policy and Improved Clinical Care (EPICC)

I. DEFINITIONS

DEPARTMENT	Utah Department of Health—EPICC Program
EXECUTIVE ULACHES	A small group of Local Health Officers and Local Health Promotion Directors
GOVERNANCE	Representatives of State and Local Health Department Leadership who meet to give approval to UDOH program staff to apply for federal grant funding and make decisions on allocation to local health departments
SUB-RECIPIENT	Local Health Department
ULACHES	Utah Local Association of Certified Health Education Specialists—Local Health Department Health Promotion Directors

II. FUNDING

- A. The source of funding provided for this agreement is from the following federal programs and awards:

Total amount funded with PHHS Block Grant (4323) \$17,764.14

CFDA number	93.991
CFDA title	Preventive Health and Health Services Block Grant
Award name	Preventive Health Services Block Grant
Award number	NB01OT009323-01-00
Award date	August 7, 2020
Name of Federal Agency	DHHS-PHS-CDC
Pass through Agency	State of Utah, Department of Health

Total amount funded with CDC 1807 Grant (4287) \$9,174.12

CFDA number	93.439
CFDA title	Assistance Programs for Chronic Disease Prevention and Control
Award name	State Physical Activity and Nutrition Program
Award number	5 NU58DP006496-3-00
Award date	July 10, 2020
Name of Federal Agency	DHHS-PHS-CDC
Pass through Agency	State of Utah, Department of Health

Total amount funded with CDC 1815 Grant (4230) \$8,160.00

CFDA number	93.426
CFDA title	Interventions in Utah that will improve outcomes for the residents of Utah specific to diabetes and hypertension and related risk factors
Award name	Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke- Financed in part by 2018 Prevention and Public Health
Award number	5 NU58DP006512-03-00
Award date	May 13, 2020
Name of Federal Agency	DHHS-PHS-CDC
Pass through Agency	State of Utah, Department of Health

Total amount funded with CDC 1817 Grant (4260)

\$27,200.00

CFDA number	93.435
CFDA title	Innovation Awards—Diabetes, Heart Disease and Stroke
Award name	Innovative State and Local Public Health Strategies to Prevent and Manage Diabetes and Heart Disease and Stroke
Award number	5 NU58DP006609-03-00
Award date	June 21, 2020
Name of Federal Agency	DHHS-PHS-CDC
Pass through Agency	State of Utah, Department of Health

- B. DUNS Number: 079815014
- C. Indirect Cost Rate: [0%]
- D. As set forth in the funding periods below, the DEPARTMENT agrees to reimburse the SUB-RECIPIENT up to the maximum of \$62,298.26 for expenditures made by the SUB-RECIPIENT directly related to this project as described in Section III Services A - D.
 - i. Allowable expenditures include wages and salaries, fringe benefits, supplies, travel, subcontract costs, consultants and current expense.
 - ii. The SUB-RECIPIENT will report monthly expenditures, using a separate line item for each allocation coding as shown in the table below, on the Monthly Expenditure Report (MER) submitted to the DEPARTMENT.
- E. By March 1, 2021 expenditures will be reviewed jointly by the DEPARTMENT and the SUB-RECIPIENT to determine if at least 35% of funds have been expended on activities as allocated.
 - i. If SUB-RECIPIENT is below 35% expenditures a written plan of action will be submitted to ensure utilization of remaining funds for contract and funding purposes.
 - ii. Over a three-year time period, if SUB-RECIPIENT consistently underspends funds, the DEPARTMENT will work with Executive ULACHES and Governance to determine appropriate reallocation of funds.
- F. Funds can only be used for services provided up to the maximum amounts listed in the tables in the Services section below:

III. SERVICES

Amount	Shall be reimbursed by the DEPARTMENT for expenditures under:	Funds may be expended between:	Allocation Coding
<u>Up to \$17,764.14</u>	CDC Prevention Block Grant	September 30, 2020 and September 29, 2021	4323/BLK21/PNO

- A. The SUB-RECIPIENT shall conduct the following activities related to the PBG grant:
- i. Strategy 1—Build Capacity to Address Overall Social Determinants of Health (SDoH)
 - 1. Community Health Needs Assessment Collaborative
 - a. Participate in the Community Health Needs Assessment (CHNA) Collaborative and/or conduct a CHNA to include SDOH measures
 - ii. Strategy 2—Build Capacity to Address SDOH – Food Insecurity
 - 1. Convene Community Partners Working on Food Insecurity
 - a. Identify and convene community partners working on food insecurity to learn what efforts are underway in local communities
 - iii. Strategy 3—Build Community Partnerships
 - 1. Community Coalitions
 - a. Actively participate and support community coalitions related to healthy living
 - iv. Strategy 4—Create Healthy Environments in School Settings
 - 1. Safe Routes to School
 - a. Increase Physical Activity at School through the Safe Routes to School Program and SR2S policies and/or maps, etc.
 - 2. Build Partnerships to Support Local Needs
 - a. Build partnerships with education leaders to support local needs
 - v. Strategy 5—Create Healthy Environments in Worksite Settings
 - 1. Worksite ScoreCard (LHD)
 - a. Complete the CDC Worksite ScoreCard at your local health department on your anniversary date
 - b. Identify and create an action plan

Amount	Shall be reimbursed by the DEPARTMENT for expenditures under:	Funds may be expended between:	Allocation Coding
<u>Up to \$9,174.12</u>	CDC 1807 Grant (Physical Activity and Nutrition)	September 30, 2020 and September 29, 2021	4287/PN21

- B. The SUB-RECIPIENT shall conduct the following activities related to the 1807 grant:
- i. Strategy 1—Implement Food Service Guidelines (FSG)
 - 1. Eat Well Utah
 - a. In partnership with EPICC staff, provide technical assistance and recommendations for Eat Well implementation to one worksite and community venue based on opportunities identified in the environment scan and patron needs assessments
 - 2. Eat Well Utah Award

- a. Promote the Eat Well Utah Award
- ii. Strategy 2—Increase Physical Activity Opportunities
 - 1. Transportation and Planning Coalitions
 - a. Participate in local or regional transportation and planning coalitions/committees

Amount	Shall be reimbursed by the DEPARTMENT for expenditures under:	Funds may be expended between:	Allocation Coding
<u>Up to \$4,080.00</u>	CDC 1815 Grant (Category A, Diabetes)	June 30, 2020 and June 29, 2021	4230/HRT21/DIAB
<u>Up to \$4,080.00</u>	CDC 1815 Grant (Category B, Heart Disease)	June 30, 2020 and June 29, 2021	4230/HRT21/HDST

C. The SUB-RECIPIENT shall conduct the following activities related to the 1815 grant:

- i. Strategy 1—Collaborate with payers and relevant public and private sector organizations within the state to expand the availability of the National DPP for one or more of the following groups: Medicaid beneficiaries; state/ public employees; employees of private sector organizations.
 - 1. National DPP Coverage
 - a. Use resources from the Coverage Toolkit to facilitate conversations with one new/ Y2 worksites about offering coverage of the National DPP for their employees. -State will offer refresher Coverage Toolkit Webinar
 - b. Encourage worksites to:
 - i. Offer the National DPP LCP
 - ii. Refer to existing National DPP LCPs
 - iii. Develop policy to provide payment of National DPP participation for employees
 - iv. Promote Intermountain’s “Weigh to Health” National DPP LCP to Associated Food Stores, Inc. companies
- ii. Strategy 2—Increase enrollment in CDC-recognized lifestyle change programs
 - 1. National DPP Enrollment
 - a. Promote and support existing and new National DPPs in your area; to include: TA, promotion and training on Compass, and facilitate partnerships among National DPPs
- iii. Strategy 3—Facilitate self-measured blood pressure monitoring
 - 1. Implement Self-Monitoring Blood Pressure (SMBP) Programs
 - a. Work with one clinic to implement self-monitoring blood pressure programs

Amount	Shall be reimbursed	Funds may be	Allocation Coding
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	by the DEPARTMENT for expenditures under:	expended between:	
<u>Up to \$13,600.00</u>	CDC 1817 Grant (Category A, Diabetes)	September 30, 2020 and September 29, 2021	4260/DSM21/DIAB
<u>Up to \$13,600.00</u>	CDC 1817 Grant (Category B, CVD)	September 30, 2020 and September 29, 2021	4260/DSM21/HDST

D. The SUB-RECIPIENT shall conduct the following activities related to the 1817 grant:

- i. Strategy 1—Explore and test innovative ways to eliminate barriers to participation and retention in CDC recognized lifestyle change programs for type 2 diabetes prevention and/or ADA recognized/AADE-accredited diabetes self-management education and support (DSMES*) programs for diabetes management among high burden populations. Promote the continuing education module on diabetes risk and self-management for low-income WIC participants.
 1. Clinics; Educate Providers to Refer into DSMES
 - a. Work with one clinic to educate providers on how to refer patients with diabetes to DSMES, how to locate DSMES programs, and the 4 Critical Times to refer to DSME, as well as implement referral and follow up processes to DSMES in clinics and raise awareness of DSMES among healthcare providers
 2. The Association of Diabetes Care & Education Specialist (ADCES)/American Diabetes Association (ADA); Increase referrals to, participate in retention of DSMES; Marketing and Promoting
 - a. Work with one local ADCES accredited/ADA recognized DSMES providers to increase referrals to, participation in, and retention of DSMES through facilitating referring provider/clinic connections with DSMES programs, disseminating marketing materials, and promoting DSMES to persons with diabetes
 3. Non-Traditional; Satellite Sites
 - a. Work with at least one non-traditional location identified in Y2 and partner with ADCES accredited/ADA recognized DSMES programs to begin implementing satellite sites for offering DSMES. For areas where a non-traditional location was not identified in Y2, work to assess community need and identify 1-2 non-traditional locations that could serve as a satellite site for a current DSMES program.
- ii. Strategy 2—Promote evidence-based quality measures
 1. Stratify Standard Quality Measures
 - a. Work with one clinic to stratify quality measures by high burden subpopulations
 2. Implement Clinic Interventions to Reduce Disparities

- a. Implement clinical interventions with one clinic to identify and/or address barriers to achieving blood pressure (BP) control

IV. RESPONSIBILITY OF THE SUB-RECIPIENT

- A. The SUB-RECIPIENT shall conform to the Americans with Disabilities Act (ADA) including associated regulations and policies and Civil Rights laws, regulations and policies, which includes providing reasonable accommodations to those with disabilities and displaying required notices of rights.
- B. The SUB-RECIPIENT staff shall participate in at least (1) site visit with the DEPARTMENT staff.
- C. The SUB-RECIPIENT staff will attend the annual EPICC Forum.
- D. The SUB-RECIPIENT staff will attend the Healthy Living and Chronic Conditions Disease Management (CCDM) workgroups.
- E. The SUB-RECIPIENT shall provide detailed reports on progress and results by the following dates:
 - i. January 15, 2021
 - ii. April 15, 2021
 - iii. July 15, 2021
 - iv. October 15, 2021
- F. The SUB-RECIPIENT shall use Catalyst to document the progress made on the activities to the DEPARTMENT's Program Liaison. The SUB-RECIPIENT shall ensure that necessary information is entered into all required reporting fields.
- G. The SUB-RECIPIENT shall provide progress, results and performance measure data as outlined in Catalyst.
- H. The DEPARTMENT will provide additional evaluation criteria as agreed upon by EPICC and ULACHES.

V. RESPONSIBILITY OF DEPARTMENT

- A. The DEPARTMENT agrees to provide written confirmation of receipt of reports within 10 working days
- B. The DEPARTMENT agrees to provide written feedback on results or progress within 20 working days of receipt of quarterly progress and end-year reports.
 - i. The SUB-RECIPIENT agrees to reply to feedback, in the space provided in Catalyst, within 10 working days of receipt of DEPARTMENT feedback.
- C. The DEPARTMENT agrees to provide training and technical assistance as requested or needed.
- D. The DEPARTMENT agrees to conduct one site visit during the contract period at mutually agreed upon times with a jointly developed agenda during contract period.
- E. The DEPARTMENT agrees to communicate annual spending to the SUB-RECIPIENT.