

Appendix A

Substance Use Services - Statement of Work Pinellas County Health Program and Health Care for the Homeless

1. Logic Model - Reporting and Outcomes
2. HRSA HCH NOA & Budget
3. Grant Requirements



Define - Measure - Analyze - Improve - Control

Project or Program: Operation PAR, Inc. Substance Use Program (HRSA HCH Grant & PCHP General Fund)

Goal: To provide comprehensive substance use services to include evidence based practices for active/eligible Pinellas County Health Program/Health Care for the Homeless clients

INPUTS		ACTIVITIES		OUTCOMES		
What we invest	What we do	Who we reach	Outputs	Short-term results	Intermediate results	Long-term results
<ul style="list-style-type: none"> HRSA - 547,750.00 PCHP - 204,000.00 	<p>Provide screening and assessment; develop appropriate outpatient based treatment plans (ie., counseling, medication assisted treatment, case management) for active, referred PCHP/HCH clients.</p> <p>Communicate and Report to the health center programs on referral status, client record summaries for each enrolled client, and report quarterly performance measures to the program</p> <p>Provide eligible patients with assistance in enrolling in the</p>	<p>Active/Enrolled PCHP/HCH clients w/substance use disorders and/or co-occurring diagnosis.</p>	<p>Number of clients served</p> <ul style="list-style-type: none"> Vivitrol Methadone Maintenance Suboxone/Bup <p>Demographics (unique counts)</p> <ul style="list-style-type: none"> Gender Race/ethnicity Age Homeless Veteran Status First Treatment methodology or previous engagement in Substance Use Treatment <p>Number of each service provided during quarter (encounters):</p> <ul style="list-style-type: none"> Visit Type (UDS and Non-UDS) <ul style="list-style-type: none"> In person vs. telehealth <p>Provider Type</p> <p>Diagnosis Code – confirm PAR can provide ICD10 code</p> <p>CPT Code</p>	<p>Increase number of clients served Substance Use Services * by 5% annually</p> <p>Expand #/% of entities referring individuals to this program. (Establish Baseline – review in Q1 and assess)</p>	<p>#/% of clients continuing treatment by 6 months, 1 year, 2 year</p>	<p>#/% of clients continuing treatment by 1 year, 2 year</p> <p>#/% of clients in continuing treatment following transition to take home</p> <p>#/% of clients continuing sobriety 1 year discharge</p> <p>active clients who overdose (EMS) while engaged in treatment or go to hospital (HIE data)</p>



Define - Measure - Analyze - Improve - Control

	PCHP/HCH program		Referral # Referral Source # discharge (reason: disengage, lost contact, moved programs)			
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Created by Pinellas County Human Services, Revised by JG 05/12/2021
Highlighted outcomes are being established



Department of Health and Human Services
Health Resources and Services Administration

Notice of Award
FAIN# H8000024
Federal Award Date: 01/18/2022

Recipient Information

- 1. Recipient Name**
Pinellas County Board of County Commissioners
315 Court St
Clearwater, FL 33756-5165
- 2. Congressional District of Recipient**
13
- 3. Payment System Identifier (ID)**
1596000800A2
- 4. Employer Identification Number (EIN)**
596000800
- 5. Data Universal Numbering System (DUNS)**
055200216
- 6. Recipient's Unique Entity Identifier**
R37RMC63XKG1
- 7. Project Director or Principal Investigator**
Karen Yatchum
kyatchum@pinellascounty.org
(727)464-5045
- 8. Authorized Official**
Karen Yatchum
Kyatchum@co.pinellas.fl.us
(727)464-5045

Federal Agency Information

- 9. Awarding Agency Contact Information**
Saul Arana
Grants Management Specialist
Office of Federal Assistance Management (OFAM)
Division of Grants Management Office (DGMO)
SArana@hrsa.gov
(301) 443-6555
- 10. Program Official Contact Information**
Clarice A Wilkinson
Lead Public Health Analyst
Bureau of Primary Health Care (BPHC)
cwillkinson@hrsa.gov
(301) 443-7754

Federal Award Information

- 11. Award Number**
5 H80CS00024-21-00
- 12. Unique Federal Award Identification Number (FAIN)**
H8000024
- 13. Statutory Authority**
42 U.S.C. § 254b
- 14. Federal Award Project Title**
Health Center Program
- 15. Assistance Listing Number**
93.224
- 16. Assistance Listing Program Title**
Community Health Centers
- 17. Award Action Type**
Noncompeting Continuation
- 18. Is the Award R&D?**
No

Summary Federal Award Financial Information

- 19. Budget Period Start Date 03/01/2022 - End Date 02/28/2023**
- 20. Total Amount of Federal Funds Obligated by this Action** \$1,305,346.00
 - 20a. Direct Cost Amount
 - 20b. Indirect Cost Amount
- 21. Authorized Carryover** \$0.00
- 22. Offset** \$18,078.00
- 23. Total Amount of Federal Funds Obligated this budget period** \$1,305,346.00
- 24. Total Approved Cost Sharing or Matching, where applicable** \$3,451,380.00
- 25. Total Federal and Non-Federal Approved this Budget Period** \$5,215,945.00
- 26. Project Period Start Date 03/01/2019 - End Date 02/28/2023**
- 27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period** \$18,641,929.00

- 28. Authorized Treatment of Program Income**
Addition
- 29. Grants Management Officer – Signature**
Lisa Ayoub on 01/18/2022

30. Remarks

This grant is included under Expanded Authority



Notice of Award
Award Number: 5 H80CS00024-21-00
Federal Award Date: 01/18/2022

Bureau of Primary Health Care (BPHC)

<div><div>31. APPROVED BUDGET: (Excludes Direct Assistance)</div><div><div><input type="checkbox"/> Grant Funds Only</div><div><input checked="" type="checkbox"/> Total project costs including grant funds and all other financial participation</div></div></div> <table><tr><td>a. Salaries and Wages:</td><td>\$28,600.00</td></tr><tr><td>b. Fringe Benefits:</td><td>\$10,060.00</td></tr><tr><td>c. Total Personnel Costs:</td><td>\$38,660.00</td></tr><tr><td>d. Consultant Costs:</td><td>\$0.00</td></tr><tr><td>e. Equipment:</td><td>\$0.00</td></tr><tr><td>f. Supplies:</td><td>\$750.00</td></tr><tr><td>g. Travel:</td><td>\$5,555.00</td></tr><tr><td>h. Construction/Alteration and Renovation:</td><td>\$0.00</td></tr><tr><td>i. Other:</td><td>\$21,215.00</td></tr><tr><td>j. Consortium/Contractual Costs:</td><td>\$5,149,765.00</td></tr><tr><td>k. Trainee Related Expenses:</td><td>\$0.00</td></tr><tr><td>l. Trainee Stipends:</td><td>\$0.00</td></tr><tr><td>m. Trainee Tuition and Fees:</td><td>\$0.00</td></tr><tr><td>n. Trainee Travel:</td><td>\$0.00</td></tr><tr><td>o. TOTAL DIRECT COSTS:</td><td>\$5,215,945.00</td></tr><tr><td>p. INDIRECT COSTS (Rate: % of S&W/TADC):</td><td>\$0.00</td></tr><tr><td>q. TOTAL APPROVED BUDGET:</td><td>\$5,215,945.00</td></tr><tr><td> i. Less Non-Federal Share:</td><td>\$3,451,380.00</td></tr><tr><td> ii. Federal Share:</td><td>\$1,764,565.00</td></tr></table>	a. Salaries and Wages:	\$28,600.00	b. Fringe Benefits:	\$10,060.00	c. Total Personnel Costs:	\$38,660.00	d. Consultant Costs:	\$0.00	e. Equipment:	\$0.00	f. Supplies:	\$750.00	g. Travel:	\$5,555.00	h. Construction/Alteration and Renovation:	\$0.00	i. Other:	\$21,215.00	j. Consortium/Contractual Costs:	\$5,149,765.00	k. Trainee Related Expenses:	\$0.00	l. Trainee Stipends:	\$0.00	m. Trainee Tuition and Fees:	\$0.00	n. Trainee Travel:	\$0.00	o. TOTAL DIRECT COSTS:	\$5,215,945.00	p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$0.00	q. TOTAL APPROVED BUDGET:	\$5,215,945.00	i. Less Non-Federal Share:	\$3,451,380.00	ii. Federal Share:	\$1,764,565.00	<div><div>33. RECOMMENDED FUTURE SUPPORT:</div><div>(Subject to the availability of funds and satisfactory progress of project)</div><table><tr><th>YEAR</th><th>TOTAL COSTS</th></tr><tr><td colspan="2">Not applicable</td></tr></table><div>34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)</div><table><tr><td>a. Amount of Direct Assistance</td><td>\$0.00</td></tr><tr><td>b. Less Unawarded Balance of Current Year's Funds</td><td>\$0.00</td></tr><tr><td>c. Less Cumulative Prior Award(s) This Budget Period</td><td>\$0.00</td></tr><tr><td>d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION</td><td>\$0.00</td></tr></table><div>35. FORMER GRANT NUMBER</div><div>H66CS00382</div><div>36. OBJECT CLASS</div><div>41.51</div><div>37. BHCNIS#</div><div>042040</div></div>	YEAR	TOTAL COSTS	Not applicable		a. Amount of Direct Assistance	\$0.00	b. Less Unawarded Balance of Current Year's Funds	\$0.00	c. Less Cumulative Prior Award(s) This Budget Period	\$0.00	d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION	\$0.00
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<div>32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:</div> <table><tr><td>a. Authorized Financial Assistance This Period</td><td>\$1,764,565.00</td></tr><tr><td>b. Less Unobligated Balance from Prior Budget Periods</td><td></td></tr><tr><td> i. Additional Authority</td><td>\$0.00</td></tr><tr><td> ii. Offset</td><td>\$18,078.00</td></tr><tr><td>c. Unawarded Balance of Current Year's Funds</td><td>\$441,141.00</td></tr><tr><td>d. Less Cumulative Prior Award(s) This Budget Period</td><td>\$0.00</td></tr><tr><td>e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION</td><td>\$1,305,346.00</td></tr></table>		a. Authorized Financial Assistance This Period	\$1,764,565.00	b. Less Unobligated Balance from Prior Budget Periods		i. Additional Authority	\$0.00	ii. Offset	\$18,078.00	c. Unawarded Balance of Current Year's Funds	\$441,141.00	d. Less Cumulative Prior Award(s) This Budget Period	\$0.00	e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$1,305,346.00																																				
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<div>38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:</div> <div>a. The program authorizing statute and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.</div>																																																			
<div>39. ACCOUNTING CLASSIFICATION CODES</div> <table><tr><th>FY-CAN</th><th>CFDA</th><th>DOCUMENT NUMBER</th><th>AMT. FIN. ASST.</th><th>AMT. DIR. ASST.</th><th>SUB PROGRAM CODE</th><th>SUB ACCOUNT CODE</th></tr><tr><td>22 - 398879L</td><td>93.527</td><td>19H80CS00024</td><td>\$1,305,346.00</td><td>\$0.00</td><td>HCH</td><td>HEALTHCARECENTERS_19</td></tr></table>		FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE	22 - 398879L	93.527	19H80CS00024	\$1,305,346.00	\$0.00	HCH	HEALTHCARECENTERS_19																																				
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HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e., created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit <https://grants3.hrsa.gov/2010/WebEPSEExternal/Interface/common/accesscontrol/login.aspx> to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Term(s)

1. This Notice of Award is issued based on HRSA's approval of the Non-Competing Continuation (NCC) Progress Report. All post-award requests, such as significant budget revisions or a change in scope, must be submitted as a Prior Approval action via the Electronic Handbooks (EHBs) and approved by HRSA prior to implementation. Grantees under "Expanded Authority," as noted in the Remarks section of the Notice of Award, have different prior approval requirements. See "Prior-Approval Requirements" in the DHHS Grants Policy Statement:
<http://www.hrsa.gov/grants/hhsgrantspolicy.pdf>
2. The funds for this award are in a sub-account in the Payment Management System (PMS). This type of account allows recipients to specifically identify the individual grant for which they are drawing funds and will assist HRSA in monitoring the award. Access to the PMS account number is provided to individuals at the organization who have permissions established within PMS. The PMS sub-account code can be found on the HRSA specific section of the NoA (Accounting Classification Codes). Both the PMS account number and sub-account code are needed when requesting grant funds. **Please note that for new and competing continuation awards issued after 10/1/2020, the sub-account code will be the document number.**
You may use your existing PMS username and password to check your organizations' account access. If you do not have access, complete a PMS Access Form (PMS/FFR Form) found at: <https://pmsapp.psc.gov/pms/app/userrequest>. If you have any questions about accessing PMS, contact the PMS Liaison Accountant as identified at:
<http://pms.psc.gov/find-pms-liaison-accountant.html>
3. This action awards prorated funding support through November 30, 2022 based on your FY 2022 target funding under the Health Center Program. The balance of grant support for the FY 2022 budget period will be provided in a subsequent action based on the final FY 2022 Health Center Program appropriation.
4. This Notice of Award provides the offset of an unobligated balance in the amount of \$18,078.00 from the 03/01/2020-02/28/2021 budget period to the current budget period. Please be advised that if the final resolution of the audit determines that the unobligated balance of Federal Funds is incorrect, HRSA is not obligated to make additional Federal Funds available to cover the shortfall.

Program Specific Term(s)

1. If federal funds have been used toward the costs of acquiring a building, including the costs of amortizing the principal of or paying interest on mortgages, you must notify the HRSA Grants Management Contact listed on this Notice of Award (NoA) for assistance regarding Federal Interest in the property within 60 days of the release date of this NoA.
2. The non-federal share of the project budget includes all program income sources such as fees, premiums, third party reimbursements, and payments that are generated from the delivery of services, and from other revenue sources such as state, local, or other federal grants or contracts; private support; and income generated from fundraising and donations/contributions.

The description of "Authorized Treatment of Program Income" under the "Addition" alternative, as cited elsewhere in this Notice of Award, is superseded by the requirements in section 330(e)(5)(D) of the PHS Act relating to the use of nongrant funds. Under this statutory provision, health centers shall use nongrant funds, including funds in excess of those originally expected, "as permitted under section 330," and may use such funds "for such purposes as are not specifically prohibited under section 330 if such use furthers the objectives of the project."

Under 45 CFR 75.351(a), subrecipients (entities that receive a subaward from a pass-through entity for the purpose of carrying out a portion of a Federal award received by the pass-through entity) are responsible for adherence to applicable Federal program requirements specified in the Federal award.

3. Health centers that purchase, are reimbursed for, or provide reimbursement to other entities for outpatient prescription drugs are expected to secure the best prices available for such products to maximize results for the health center and its patients. Eligible health care organizations/covered entities that enroll in the 340B Drug Pricing Program must comply with all 340B Program requirements and will be subject to audit regarding 340B Program compliance. 340B Program requirements, including eligibility, can be found at www.hrsa.gov/opa.
4. The Uniform Data System (UDS) annual performance report is due in accordance with specific instructions from the Program Office. Failure to submit a complete UDS report by the specified deadline may result in HRSA placing additional conditions and/or restrictions on your award, including the requirement that all drawdowns of Health Center Program award funds from the Payment Management System have prior approval from the HRSA Division of Grants Management Operations and/or limits on eligibility to receive future supplemental funding.
5. This grant is governed by the post-award requirements cited in Subpart D-Post Federal Award Requirements, standards for program and fiscal management of 45 CFR Part 75 except when the Notice of Award indicates in the "Remarks" section that the grant is included under "Expanded Authority." These recipients may take the following action without prior approval of the Grant Management Officer:
Section 75.308 (d)(3) Carry forward unobligated balances to subsequent periods of performance: Except for funds restricted on a Notice of Award, recipients are authorized to carry over unobligated grant funds remaining at the end of that budget period up to 25% of the amount awarded for that budget period.
In all cases, the recipient must notify HRSA when it has elected to carry over unobligated balances (UOB) under Expanded Authority and indicate the amount to be carried over. This notification must be provided by the recipient under item 12, "Remarks," on the initial submission of the Federal Financial Report (FFR). In this section of the FFR, the recipient must also provide details regarding the source of the UOB for each type of funding received and to be carried over (e.g., the specific supplemental award(s), base operational funding). If the recipient wishes to carry over UOB in excess of 25% of the total amount awarded, the recipient must submit a prior approval request for carryover in the HRSA Electronic Handbooks (EHBs). Contact your Grants Management Specialist with any questions.
6. Some Health Center Program award recipients carry out all or a portion of their project through the disbursement of Health Center Federal program award funds to another entity, referred to as a "subaward" as defined in 45 CFR part 75. A health center that makes a subaward(s) must document its determination that, at the time such a subaward is made, the entity that receives the subaward (the subrecipient) meets all the Health Center Program requirements applicable to the award recipient's Health Center Program Federal award.
During Health Center Program site visits or application reviews, HRSA may require the Health Center Program award recipient to provide documentation of its subrecipient's compliance with applicable Health Center Program requirements. This includes but is not limited to documentation demonstrating compliance with requirements found in [Section 330 of the PHS Act \(42 U.S.C. § 254b\)](#), [42 CFR part 51c](#) and [42 CFR part 56](#) (for Community and Migrant Health Centers, respectively). All subrecipients must also comply with applicable grants requirements, particularly those set forth in [45 CFR 75.351-353](#). See Chapter 12: Contracts and Subawards of the [Health Center Program Compliance Manual](#) for additional information.
Note that certain entities may be eligible to receive additional federal benefits associated with the receipt of Health Center Program funding - including [Federally Qualified Health Center \(FQHC\)](#) payment rates under Medicaid and Medicare, 340B Drug Pricing, and Federal Tort Claims Act (FTCA) coverage. However, such benefits have additional requirements and may require additional actions by recipients and/or subrecipients to obtain them.
For example, in order to establish eligibility for FTCA coverage under the Federally Supported Health Centers Assistance Acts of 1992 of 1995 (section 224(g)-(n) of the PHS Act), "subrecipients" are eligible for FTCA coverage "only if they provide a full range of health care services on behalf of an eligible grantee and only for those services carried out under the grant funded project." 42 CFR 6.3(b). Such subrecipients seeking FTCA coverage for their grant-related activities also must submit a deeming application through the award recipient in the form and manner required by HRSA and be separately deemed as PHS employees for this purpose in order for FTCA coverage to apply. See: <https://bphc.hrsa.gov/sites/default/files/bphc/ftca/pdf/pal-2021-01.pdf>. Similarly, both recipients and subrecipients must comply with the Centers for Medicare & Medicaid Services (CMS) and state Medicaid programs for FQHC payment/reimbursement. See: <https://www.cms.gov/Center/Provider-Type/Federally-Qualified-Health-Centers-FQHC-Center>.
7. Pursuant to existing law, and consistent with Executive Order 13535 (75 FR 15599), health centers are prohibited from using federal funds to provide abortion services (except in cases of rape or incest, or when the life of the woman would be endangered).
8. You are required to submit an annual Budget Period Progress Report non-competing continuation (NCC) to report on progress made from the beginning of your most recent budget period until the date of NCC submission, the expected progress for the remainder of the budget period, and any projected changes for the following budget period. HRSA approval of an NCC is required for the release of each subsequent year of funding. Such funding is also dependent on Congressional appropriation, program compliance, organizational capacity, and a determination that continued funding would be in the best interest of the federal government. Failure to submit the NCC by the established deadline, or submission of an incomplete or non-responsive progress report, may result in a delay or a lapse in funding.
9. You must submit a separate Medicare Federally Qualified Health Centers (FQHC) enrollment application for each permanent site at which you provide services. This includes both permanent sites and seasonal sites under your HRSA scope of project (see

<https://bphc.hrsa.gov/programrequirements/scope.html> for more information). Each permanent site must be individually enrolled in Medicare as an FQHC and submit for FQHC reimbursement using its unique FQHC Medicare billing number.

In order to enroll in Medicare, first obtain a National Provider Identifier (NPI) at <https://nppes.cms.hhs.gov/#/>. You may enroll in Medicare electronically via the Medicare Provider Enrollment, Chain, and Ownership System (PECOS) available at <https://pecos.cms.hhs.gov>. PECOS automatically routes applications to the appropriate Medicare Administrative Contractor for review and approval. While HRSA encourages electronic application, you may alternatively choose to submit a paper application, available at <https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/cms855a.pdf>. To identify the address where the package should be mailed, refer to <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/index?redirect=/MedicareProviderSupEnroll>. The appropriate Medicare contractor is listed next to the Fiscal Intermediary.

Contact your State Medicaid office to determine the process and timeline for becoming eligible for payment as an FQHC under Medicaid.

10. You must comply with all Health Center Program requirements. The Health Center Program Compliance Manual (<https://bphc.hrsa.gov/programrequirements/compliancemanual/index.html>) identifies Health Center Program requirements and provides guidance for health centers regarding ways that they may demonstrate compliance with these Health Center Program requirements. The Compliance Manual also serves as the foundation for HRSA's compliance determinations and for health centers when responding to any subsequent Progressive Action condition(s) placed on a Notice of Award or Notice of Look-Alike Designation due to an identified area(s) of non-compliance. For additional information on the Progressive Action process, see Chapter 2: Health Center Program Oversight of the Compliance Manual. If you elect to respond to a condition by demonstrating compliance in a manner alternative to the guidance specified in the Compliance Manual, the response must: 1) explicitly indicate that the health center is proposing an alternative means of demonstrating compliance; and 2) include an explanation and documentation of how this alternative explicitly demonstrates compliance with applicable Health Center Program requirements. All responses to conditions are subject to review and approval by HRSA.
11. Your scope of project includes the approved service sites, services, providers, service area, and target population which are supported (wholly or in part) under your total approved health center budget. In addition, the scope of project serves as the basis for eligibility for associated programs such as Medicare and Medicaid Federally Qualified Health Center (FQHC) enrollment and reimbursements, Federal Tort Claims Act coverage, and 340B Drug Pricing. Proper documentation and maintenance of an accurate scope of project is critical in the oversight and management of programs funded or designated under section 330 of the PHS Act.

You are responsible for maintaining the accuracy of your Health Center Program scope of project, including updating or requesting prior approval for significant changes to the scope of project when applicable. You must submit requests to change the approved scope of project for approval via the HRSA Electronic Handbooks (EHBs) Change in Scope Module. Refer to the Scope of Project webpage (<http://www.bphc.hrsa.gov/programrequirements/scope.html>) for details pertaining to changes to sites, services, service area zip codes, and target population(s).

Standard Term(s)

1. Your organization must comply with all HRSA [Standard Terms](#) unless otherwise specified on your Notice of Award.

Reporting Requirement(s)

1. **Due Date: Annually (Calendar Year) Beginning: 01/01/2022 Ending: 12/31/2022, due 45 days after end of reporting period.**

The Uniform Data System (UDS) is a core set of information appropriate for reviewing the operation and performance of health centers. The data help to identify trends over time, enabling HRSA to establish or expand targeted programs and identify effective services and interventions to improve the health of underserved communities and vulnerable populations. UDS data also inform Health Center programs, partners, and communities about the patients served by health centers. You must submit your UDS report annually on or before February 15. Contact the UDS Support Line at 1-866-837-4357 or udshelp330@bphcdata.net for additional instructions or for questions. Reporting technical assistance is available on the UDS Resources webpage (<https://bphc.hrsa.gov/datareporting/index.html>).

2. **Due Date: Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due Quarter End Date after 90 days of reporting period.**

The recipient must submit an annual Federal Financial Report (FFR). The report should reflect cumulative reporting within the project period of the document number. **Effective October 1, 2020, all FFRs will be submitted through the Payment Management System (PMS).** Technical questions regarding the FFR, including system access should be directed to the PMS Help Desk by submitting a ticket through the self-service web portal ([PMS Self-Service Web Portal](#)), or calling 877-614-5533.

The FFR will be due 90, 120, or 150 days after the budget period end date. Please refer to the chart below for the specific due date for your FFR.

- Budget Period ends August – October: FFR due January 30
- Budget Period ends November – January: FFR due April 30
- Budget Period ends February – April: FFR due July 30
- Budget Period ends May – July: FFR due October 30

Failure to comply with these reporting requirements will result in deferral or additional restrictions of future funding decisions.

Contacts

NoA Email Address(es):

Name	Role	Email
Karen Yatchum	Program Director, Authorizing Official	kyatchum@pinellascounty.org, kyatchum@co.pinellas.fl.us
Elisa Degregorio	Point of Contact, Business Official	edegregorio@pinellascounty.org

Note: NoA emailed to these address(es)

All submissions in response to conditions and reporting requirements (with the exception of the FFR) must be submitted via EHBs. Submissions for Federal Financial Reports (FFR) must be completed in the Payment Management System (<https://pms.psc.gov/>).

Budget Justification	FY 2022 Budget Period		
	Federal Grant Request	Non-Federal Resources	Total
REVENUE – Should be consistent with information presented in Budget Information: Budget Details form and Form 3: Income Analysis			
HHS HRSA Health Center Program Funding FY22	\$ 1,764,565.00		\$ 1,764,565.00
STATE FUNDS		\$ 480,463.00	\$ 480,463.00
LOCAL FUNDS		\$ 2,969,045.00	\$ 2,969,045.00
FEDERAL FUNDING			
OTHER FEDERAL FUNDING			
(break out by source — e.g., HUD, CDC)			
OTHER SUPPORT			
PROGRAM INCOME (fees, third party reimbursements, and payments generated from the projected delivery of services)		\$ 1,872.00	\$ 1,872.00
TOTAL REVENUE	\$ 1,764,565.00	\$ 3,451,380.00	\$ 5,215,945.00
EXPENSES: Object class totals should be consistent with those presented in Section B of the Budget Information: Budget Details form.			
PERSONNEL			
ADMINISTRATION			
Project Director/Health Care Administrator (CEO) 0.20 FTE \$143,000 annual salary K. Yatchum		\$ 28,600.00	\$ 28,600.00
MEDICAL STAFF			
DENTAL STAFF			
BEHAVIORAL HEALTH STAFF			
ENABLING STAFF			
OTHER STAFF			
TOTAL PERSONNEL	\$ -	\$ 28,600.00	\$ 28,600.00
FRINGE BENEFITS			
FICA @ 0.0765		\$ 2,188.00	\$ 2,188.00
State Retirement Contribution @ 0.1074		\$ 3,072.00	\$ 3,072.00
Group Life Insurance @ 0.0016		\$ 46.00	\$ 46.00
Long-Term Disability @ 0.0051		\$ 146.00	\$ 146.00
Medical @ \$21,660 x 0.20 FTE		\$ 4,332.00	\$ 4,332.00
Dental @ \$990 x 0.20 FTE		\$ 198.00	\$ 198.00
Short-Term Disability@ \$390 x 0.20 FTE		\$ 78.00	\$ 78.00
TOTAL FRINGE	\$ -	\$ 10,060.00	\$ 10,060.00
TRAVEL			
Health Care for the Homeless National Conference 3 FTEs @ \$1,700 per person - 3 nights (May 2022)	\$ 5,100.00		\$ 5,100.00
O/E Coordinator - Local Travel (1 FTE @ 812 miles/yr @ .56/mile)	\$ 455.00		\$ 455.00
TOTAL TRAVEL	\$ 5,555.00	\$ -	\$ 5,555.00
EQUIPMENT – Include items of moveable equipment that cost \$5,000 or more and with a useful life of one year or more.			
Not Applicable			
TOTAL EQUIPMENT	\$ -	\$ -	\$ -
SUPPLIES			
Printing: HCH Outreach Brochure (\$0.25 per brochure x 3,000 copies)	\$ 750.00		\$ 750.00
TOTAL SUPPLIES	\$ 750.00	\$ -	\$ 750.00
CONTRACTUAL – Include sufficient detail to justify costs.			

Budget Justification	FY 2022 Budget Period		
	Federal Grant Request	Non-Federal Resources	Total
Contractor: Florida Department of Health in Pinellas County (DOH): provides or subcontracts for a significant portion of required and additional services within the health center's scope of project. DOH also provides quality improvement services, and patient support staff in support of the Patient Centered Medical Home concepts. DOH will serve the patient target of 2,940 unduplicated patients with qualified primary care medical encounters along with identified clinical measure goals as reported in the UDS report. Pinellas County meets monthly with management of the organization, as well as through several sub-committees to support the contract monitoring and program service delivery.			
Clinical Primary Care Services			
Medical Director C. Ravindra .50 FTE x (\$172,030 salary + \$52,088 fringe)		\$ 112,059.00	\$ 112,059.00
QI Coordinator R. O'Brien .70 FTE x (\$79,511 salary + \$33,889 fringe)		\$ 79,380.00	\$ 79,380.00
Program Supervisor R. Bernard 1.0 FTE x (\$60,263 salary + \$20,365 fringe)		\$ 80,627.00	\$ 80,627.00
Care Coordinator C. Ufodu 1.0 FTE x (\$43,882 salary + \$27,601 fringe)		\$ 71,483.00	\$ 71,483.00
Computer Program Analyst A. Verrett 0.50 FTE x (\$40,395 salary + \$8,660 fringe)		\$ 24,527.00	\$ 24,527.00
Senior Physician R. Mungara 0.50 FTE x (\$66,975 salary + 33,525 fringe)	\$ 100,500.00		\$ 100,500.00
ARNP L. Fitzgerald 1.0 FTE x (\$83,491 salary + \$35,126 fringe)	\$ 118,617.00		\$ 118,617.00
ARNP C. Odonohoe 1.0 FTE x (\$83,491 salary + \$35,126 fringe)	\$ 118,617.00		\$ 118,617.00
ARNP Vacant 0.40 FTE x (\$33,397 salary + \$20,297 fringe)		\$ 53,694.00	\$ 53,694.00
Physician (OPS) Dr. Rao 0.2 FTE x \$140,400 salary + 407 fringe)	\$ 28,487.00		\$ 28,487.00
Registered Nurse M. Handy 1.0 FTE x (\$44,990 salary + \$17,140 fringe)	\$ 62,130.00		\$ 62,130.00
Registered Nurse J. George 1.0 FTE x (\$48,030 salary + \$27,989 fringe)		\$ 76,320.00	\$ 76,320.00
Nurse Senior LPN O. Hernandez 1.0 FTE x (\$42,538 salary + \$27,362 fringe)	\$ 69,900.00		\$ 69,900.00
Nurse Senior LPN L. Fieldhouse 1.0 FTE x (\$40,463 salary + \$16,337 fringe)	\$ 56,800.00		\$ 56,800.00
Medical Assistant S. Burns 1.0 FTE x (\$30,426 salary + \$14,574 fringe)	\$ 45,000.00		\$ 45,000.00
Medical Assistant C. Smith 1.0 FTE x (\$30,170 salary + \$25,208 fringe)		\$ 55,378.00	\$ 55,378.00
Clinic Supervisor C. Wittstruck 1.0 FTE x (\$35,722 salary + \$26,629 fringe)		\$ 62,351.00	\$ 62,351.00
Human Services Analyst A. Hossley 1.0 FTE x (\$34,309 salary + \$15,288 fringe)	\$ 49,597.00		\$ 49,597.00
Senior Clerk A. Brooks 1.0 FTE x (\$29,250 salary + \$25,103 fringe)		\$ 54,353.00	\$ 54,353.00
Nurse Care Coordinator R. Jimenez 1.0 FTE x (\$51,846 salary + \$27,187 fringe)		\$ 79,033.00	\$ 79,033.00
Eligibility Assistance Worker Vacant 1.0 FTE x (\$29,744 salary + \$15,398 fringe)		\$ 45,142.00	\$ 45,142.00
Support Staff Marti Flores 1.0 FTE x (\$35,856 salary + \$26,189 fringe)	\$ 60,780.00		\$ 60,780.00
Family Support Worker S. Hyder 1.0 FTE x (\$30,170 salary + \$15,976 fringe)		\$ 46,146.00	\$ 46,146.00
Dental Services			
Encounter w/Dentist @ \$109/visit (1,761 federal + 1,879 non-federal encounters)	\$ 191,949.00	\$ 197,290.00	\$ 389,239.00
Encounter w/Hygienist @ \$70/visit (200 federal + 235 non-federal encounters)	\$ 14,000.00	\$ 14,700.00	\$ 28,700.00

Budget Justification	FY 2022 Budget Period		
	Federal Grant Request	Non-Federal Resources	Total
Dentures Labs/Supplies		\$ 44,000.00	\$ 44,000.00
<u>Laboratory Services</u>			
Subcontractor to FL DOH: Quest Laboratories			
Lab Services (Avg of \$1,916/mo x 12 mo Avg 670 encounters/mo)	\$ 24,000.00	\$ 6,250.00	\$ 30,250.00
<u>Behavioral Health Services</u>			
Subcontractor to FL DOH: Directions for Living			
Integrated Behavioral Health Services + Encounter Based Services Contract	\$ 167,000.00	\$ 285,000.00	\$ 452,000.00
<u>Specialty Care Services</u>			
Subcontracted through FL Dept. of Health			
Network of Contracted Providers for Required and Additional Services within the Health Center's Approved Scope of Project (Radiology; Podiatry; Psychiatry; Other...)		\$ 600,000.00	\$ 600,000.00
<u>Local Travel</u>			
Approx 142 miles/month @ .445 cost per mile x 12 months	\$ 750.00	\$ 1,410.00	\$ 2,160.00
<u>Provider Training</u>			
Basic Life Support Training CPR @ \$58 pp/8 FTE	\$ 464.00		\$ 464.00
<u>Office Supplies</u>			
Two HC Sites: (@\$346/mo x 12 mos 2 sites)	\$ 4,150.00	\$ -	\$ 4,150.00
<u>Medical Supplies</u>			
Avg. \$2,975/mo Avg. 283 undup clients/mo; 670 encounters/mo	\$ 12,500.00	\$ 28,000.00	\$ 40,500.00
<u>Other Services</u>			
Cell Phone (\$132/month approx x 12 months x 1.0 FTE)	\$ 1,579.00	\$ 720.00	\$ 2,299.00
Data Circuit (monthly @ \$1,527.12 x 12 mo)		\$ 18,325.00	\$ 18,325.00
Transportation Assistance Vouchers/taxi services (150/mo approx. \$1,800)		\$ 1,800.00	\$ 1,800.00
Administrative Service Fee 10% (personnel only)		\$ 132,732.00	\$ 132,732.00
<u>Sub-Total: FL DOH</u>	\$ 1,126,820.00	\$ 2,170,720.00	\$ 3,297,540.00
<u>Operation PAR</u>			
<u>(Substance Abuse Services):</u> provides comprehensive substance use services including medication assisted treatment (Vivatro, Buprenephine, Methadone) to HCH clients. Low Income Pool funding from State funds the CARE Team program w/St. Anthony's hospital. Pinellas County meets monthly with the contractor and receives regular performance outcome data for review.			
<u>Personnel & Fringe</u>			
Contract Physician M. Sheehan \$199,300 max federal limit for Exec Comp II x 3.01% FTE	\$ 6,000.00		\$ 6,000.00
Dir. Outpatient Services B. Maze 0.40 FTE \$48,880 annual salary	\$ 12,220.00	\$ 7,332.00	\$ 19,552.00
Clinical Supervisor G. Burke 0.30 FTE \$56,000 annual salary	\$ 8,400.00	\$ 8,400.00	\$ 16,800.00
CEO/Project Supervisor D. Clarke 0.05 FTE \$199,300 adjusted annual salary	\$ 9,965.00		\$ 9,965.00
Counselor T. Rine 1.0 FTE \$35,823 salary	\$ 35,823.00		\$ 35,823.00
Case Manager Vacant 1.0 FTE \$38,000 salary	\$ 38,000.00		\$ 38,000.00
Counselor C. Papazian 1.0 FTE \$39,010 salary	\$ 39,010.00		\$ 39,010.00
Case Manager M. Williams 1.0 FTE \$34,000 salary	\$ 34,000.00		\$ 34,000.00
Counselor/Case Manager Vacant 1.0 FTE \$34,000 salary	\$ 34,000.00		\$ 34,000.00

Budget Justification	FY 2022 Budget Period		
	Federal Grant Request	Non-Federal Resources	Total
Counselor/Case Manager A. Bechakas 1.0 FTE \$38,940 salary	\$ 38,940.00		\$ 38,940.00
Counselor L. Guerriero 1.0 FTE \$40,081 salary		\$ 40,081.00	\$ 40,081.00
Team Coordinator L. Matthews 1.0 FTE \$28,769 salary		\$ 28,769.00	\$ 28,769.00
Evaluator/Research Assistant E. Mulgrew 0.20 FTE \$45,000 annual salary	\$ 4,500.00	\$ 4,500.00	\$ 9,000.00
Fringe @ 35% of salaries (\$260,768) (\$89,081)	\$ 91,300.00	\$ 31,179.00	\$ 122,479.00
Personnel Sub-Total	\$ 352,158.00	\$ 120,261.00	\$ 472,419.00
Medication Assisted Treatment Services (SASE)			
Methadone \$16/dose - 4178 doses (approx. 12 clients/mo)	\$ 66,847.00		\$ 66,847.00
Buprenorphine \$21/dose - 238 doses (approx. 1 client/mo)	\$ 5,000.00		\$ 5,000.00
Vivacort Screening \$150, Assessment \$540, Shot \$1,441.84 (approx. 3 clients/mo)	\$ 45,000.00		\$ 45,000.00
Local Travel			
.485 mile/@ 86 mi/mo x 4 FTE	\$ 1,500.00	\$ 500.00	\$ 2,000.00
Office Supplies			
\$16/mo x 12 months x 8 FTE	\$ 900.00	\$ 600.00	\$ 1,500.00
Other Services			
Cell Phone \$66/month x 12 mos x 7 FTE	\$ 4,331.00	\$ 1,235.00	\$ 5,566.00
Professional Liability Insurance 1.2% of staff salaries	\$ 3,129.00	\$ 1,069.00	\$ 4,198.00
Occupancy \$1,700/mo x 12 mos	\$ 12,000.00	\$ 8,400.00	\$ 20,400.00
Computer Maintenance \$51/mo x 12 mos x 7 FTE	\$ 2,568.00	\$ 1,728.00	\$ 4,296.00
Transportation Assistance Vouchers/Bus Passes (100/mo)	\$ 1,200.00		\$ 1,200.00
Residential Services (582 bed days @ \$200/day)		\$ 116,396.00	\$ 116,396.00
Psychiatric Medications		\$ 1,000.00	\$ 1,000.00
Indirect Cost Rate-14.06% (direct services only/non-MAT)	\$ 53,117.00	\$ 18,811.00	\$ 71,928.00
Sub-Total: Operation PAR	\$ 547,750.00	\$ 270,000.00	\$ 817,750.00
Personnel Solutions Plus (ACA Outreach): The County contracts with an employment agency, Personnel Solutions Plus, to hire temporary staff as needed for any County Department. The Billable Rate includes the base salary plus the fee charged by PSP.			
O&E Certified Assister E. Richards 1.0 FTE estimated 35 hrs/wk x Billable Rate \$40.92/hr	\$ 74,475.00		\$ 74,475.00
Sub-Total: Personnel Solutions Plus	\$ 74,475.00	\$ -	\$ 74,475.00
Citizens RX (Pharmacy): The County contracts with a Pharmacy Benefit Manager and its Pharmacy Network to provide needed prescriptions to HCH clients. The County meets with the provider weekly and reviews performance data monthly.			
Health Care for the Homeless (primary care) (Average invoice approximately \$80k/month)		\$ 960,000.00	\$ 960,000.00
Sub-Total: Citizens RX	\$ -	\$ 960,000.00	\$ 960,000.00
TOTAL CONTRACTUAL	\$ 1,749,045.00	\$ 3,400,720.00	\$ 5,149,765.00
OTHER – Include detailed justification. Note: Federal funding CANNOT support construction, fundraising, or lobbying costs.			
UDS Training, FL Assoc of Comm Health Centers Registration Fee: \$175/pp x 4 FTEs	\$ 700.00		\$ 700.00
Cell Phone & Wireless Services for Outreach/Enrollment Activities (\$68/mo x 12 mos)	\$ 815.00		\$ 815.00

Budget Justification	FY 2022 Budget Period		
	Federal Grant Request	Non-Federal Resources	Total
Health Care for the Homeless National Conference 3 FTEs @ \$900 per person - 3 nights (May 2022)	\$ 2,700.00		\$ 2,700.00
NextGen (EHR) Enhancements	\$ 5,000.00	\$ 12,000.00	\$ 17,000.00
TOTAL OTHER	\$ 9,215.00	\$ 12,000.00	\$ 21,215.00
TOTAL DIRECT CHARGES (Sum of TOTAL Expenses)	\$ 1,764,565.00	\$ 3,451,380.00	\$ 5,215,945.00
INDIRECT CHARGES – <i>Include approved indirect cost rate.</i>			
X% indirect cost rate (includes utilities and accounting services)			
TOTALS (Total of Total Direct Charges & Indirect Charges)	\$ 1,764,565.00	\$ 3,451,380.00	\$ 5,215,945.00

Personnel Justification Table

Name	Position Title	% of FTE	Base Salary	Adjusted Annual Salary	Federal Amount Requested
R. Mungara	Senior Physician	50%	\$ 133,950.00		\$ 66,975.00
L. Fitzgerald	ARNP	100%	\$ 83,491.00		\$ 83,491.00
C. Odonohoe	ARNP	100%	\$ 83,491.00		\$ 83,491.00
Dr. Rao	Physician	20%	\$ 140,400.00		\$ 28,487.00
M. Handy	Registered Nurse	100%	\$ 44,990.00		\$ 44,990.00
O. Hernandez	Nurse Senior LPN	100%	\$ 42,538.00		\$ 42,538.00
L. Fieldhouse	Nurse Senior LPN	100%	\$ 40,463.00		\$ 40,463.00
S. Burns	Medical Assistant	100%	\$ 30,426.00		\$ 30,426.00
A. Hossley	Human Services Analyst	100%	\$ 34,309.00		\$ 34,309.00
M. Marti Flores	Support Staff	100%	\$ 35,309.00		\$ 35,309.00
M. Sheehan	Physician	3%		\$ 199,300.00	\$ 6,000.00
B. Maze	Director, Outpatient Services	40%	\$ 48,880.00		\$ 12,220.00
G. Burke	Clinical Supervisor	30%	\$ 56,000.00		\$ 8,400.00
D. Clarke	CEO/Project Supervisor	5%		\$ 199,300.00	\$ 9,965.00
T. Rine	Counselor	100%	\$ 35,823.00		\$ 35,823.00
Vacant	Case Manager	100%	\$ 38,000.00		\$ 38,000.00
C. Papazian	Counselor	100%	\$ 39,010.00		\$ 39,010.00
M. Williams	Case Manager	100%	\$ 34,000.00		\$ 34,000.00
Vacant	Counselor/Case Manager	100%	\$ 34,000.00		\$ 34,000.00
A. Bechakas	Counselor/Case Manager	100%	\$ 38,940.00		\$ 38,940.00
E. Mulgrew	Evaluator/Research Assistant	20%	\$ 45,000.00		\$ 4,500.00
E. Richards	Outreach & Enrollment Certified Assister	100%	\$ 74,474.40		\$ 74,474.00
K. Yatchum	Health Care Administrator	20%	\$ 143,000.00		\$ -
C. Ravindra	Medical Director	50%	\$ 172,030.00		\$ -
R. O'Brien	QI Coordinator	70%	\$ 113,587.00		\$ -
R. Bernard	Program Supervisor	100%	\$ 60,263.00		\$ -
C. Ufondu	Care Coordinator	100%	\$ 43,882.00		\$ -
A. Verrett	Computer Program Analyst	50%	\$ 80,790.00		\$ -
Vacant	ARNP	40%	\$ 83,493.00		\$ -
C. Smith	Medical Assistant	100%	\$ 30,170.00		\$ -
C. Wittstruck	Supervisor	100%	\$ 35,722.00		\$ -
A. Brooks	Senior Clerk	100%	\$ 29,250.00		\$ -
R. Jimenez	Nurse Care Coordinator	100%	\$ 51,846.00		\$ -
Vacant	Eligibility Assistance Worker	100%	\$ 29,744.00		\$ -
S. Hyder	Family Support Worker	100%	\$ 30,170.00		\$ -

Grant Funding Conditions

Health Center Compliance Manual is incorporated herein and as updated by HRSA:

<https://bphc.hrsa.gov/sites/default/files/bphc/programrequirements/pdf/hc-compliance-manual.pdf>

HHS Grants Policy Statement is incorporated herein and as updated by HHS:

<https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf>

External Grants Policy Bulletin is incorporated herein and as updated by HRSA:

<https://akastage-www.hrsa.gov/sites/default/files/hrsa/grants/manage/grants-policy-bulletin-2020-04E.pdf>

CONTRACT PROVISIONS FOR CONTRACTS UNDER FEDERAL AWARDS

This solicitation is either fully or partially grant-funded. In addition to other terms and conditions required by Pinellas County and the applicable federal agency, all contracts awarded to the qualified bidder are subject to the following provisions, as applicable to the services provided.

Equal Employment Opportunity: Except as otherwise provided under 41 CFR Part 60, all contracts that meet the definition of “federally assisted construction contract” in 41 CFR Part 60-1.3 must include the equal opportunity clause provided under 41 CFR 60-1.4(b), in accordance with Executive Order 11246, “Equal Employment Opportunity” (30 FR 12319, 12935, 3 CFR Part, 1964-1965 Comp., p. 339), as amended by Executive Order 11375, “Amending Executive Order 11246 Relating to Equal Employment Opportunity,” and implementing regulations at 41 CFR part 60, “Office of Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor.”

If this contract meets the definition of a “federally assisted construction contract”, during the performance of this contract, the Contractor agrees as follows:

- (1) The CONTRACTOR will not discriminate against any employee or applicant for employment because of race, color, religion, sex, sexual orientation, gender identity, or national origin. The CONTRACTOR will take affirmative action to ensure that applicants are employed, and that employees are treated during employment without regard to their race, color, religion, sex, sexual orientation, gender identity, or national origin. Such action shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The CONTRACTOR agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided setting forth the provisions of this nondiscrimination clause.
- (2) The CONTRACTOR will, in all solicitations or advertisements for employees placed by or on behalf of the Contractor, state that all qualified applicants will receive considerations for employment without regard to race, color, religion, sex, sexual orientation, gender identity, or national origin.
- (3) The CONTRACTOR will not discharge or in any other manner discriminate against any employee or applicant for employment because such employee or applicant has inquired about, discussed, or disclosed the compensation of the employee or applicant with another employee or applicant. This provision shall not apply to instances in which an employee who has access to the compensation information of other employees or applicants as a part of such employee's essential job functions discloses the compensation of such other employees or applicants to individuals who do not

otherwise have access to such information, unless such disclosure is in response to a formal complaint or charge, in furtherance of an investigation, proceeding, hearing, or action, including an investigation conducted by the employer, or is consistent with the contractor's legal duty to furnish information.

- (4) The CONTRACTOR will send to each labor union or representative of workers with which he has a collective bargaining agreement or other contract or understanding, a notice to be provided advising the said labor union or workers' representatives of the Contractor's commitments under this section, and shall post copies of the notice in conspicuous places available to employees and applicants for employment.
- (5) The CONTRACTOR will comply with all provisions of Executive Order 11246 of September 24, 1965, and with the rules, regulations, and relevant orders of the Secretary of Labor.
- (6) The CONTRACTOR will furnish all information and reports required by Executive Order 11246 of September 24, 1965, and by rules, regulations, and orders of the Secretary of Labor, or pursuant thereto, and will permit access to his books, records, and accounts by the administering agency and the Secretary of Labor for purposes of investigation to ascertain compliance with such rules, regulations, and orders.
- (7) In the event of the CONTRACTOR's noncompliance with the nondiscrimination clauses of this contract or with any of the said rules, regulations, or orders, this contract may be canceled, terminated, or suspended in whole or in part and the CONTRACTOR may be declared ineligible for further Government contracts or federally assisted construction contracts in accordance with procedures authorized in Executive Order 11246 of September 24, 1965, and such other sanctions may be imposed and remedies invoked as provided in Executive Order 11246 of September 24, 1965, or by rule, regulation, or order of the Secretary of Labor, or as otherwise provided by law.
- (8) The CONTRACTOR will include the portion of the sentence immediately preceding paragraph (1) and the provisions of paragraphs (1) through (7) in every subcontract unless exempted by rules, regulations, or orders of the Secretary of Labor issued pursuant to section 204 of Executive Order 11246 of September 24, 1965, so that such provisions will be binding upon each subcontractor or vendor. The CONTRACTOR will take such action with respect to any subcontract or purchase order as the administering agency may direct as a means of enforcing such provisions, including sanctions for noncompliance.

Davis-Bacon Act as amended (40 U.S.C. 3141-3148): When required by federal program legislation, for all prime construction contracts awarded in excess of \$2,000, Contractors are required to pay wages to laborers and mechanics at a rate not less than the prevailing wages specified in a wage determination made by the Secretary of Labor. In addition, Contractors must be required to pay wages not less than once a week. If the applicable grant award contains Davis-Bacon provisions, the County will place a copy of

the current prevailing wage determination issued by the Department of Labor in the solicitation document. The decision to award a contract shall be conditioned upon the acceptance of the wage determination [Appendix II to 2 CFR Part 200].

Copeland Anti Kick Back Act: If Davis-Bacon is applicable, CONTRACTOR shall also comply with all the requirements of 29 CFR Part 3 which are incorporated by reference to this contract. Contractors are prohibited from inducing by any means any person employed in the construction, completion or repair of public work to give up any part of the compensation to which he or she is otherwise entitled [Appendix II to 2 CFR Part 200].

Contract Work Hours and Safety Standards Act (40 U.S.C. 3701-3708). Where applicable, all contracts awarded by the non-Federal entity in excess of \$100,000 that involve the employment of mechanics or laborers must include a provision for compliance with 40 U.S.C. 3702 and 3704, as supplemented by Department of Labor regulations (29 CFR Part 5). Under 40 U.S.C. 3702 of the Act, each contractor must be required to compute the wages of every mechanic and laborer on the basis of a standard work week of 40 hours. Work in excess of the standard work week is permissible provided that the worker is compensated at a rate of not less than one and a half times the basic rate of pay for all hours worked in excess of 40 hours in the work week. The requirements of 40 U.S.C. 3704 are applicable to construction work and provide that no laborer or mechanic must be required to work in surroundings or under working conditions which are unsanitary, hazardous or dangerous. These requirements do not apply to the purchases of supplies or materials or articles ordinarily available on the open market, or contracts for transportation or transmission of intelligence [Appendix II to 2 CFR Part 200].

Rights to Inventions Made Under a Contract or Agreement. If the Federal award meets the definition of “funding agreement” under 37 CFR §401.2 (a) and the recipient or subrecipient wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that “funding agreement,” the recipient or subrecipient must comply with the requirements of 37 CFR Part 401, “Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements,” and any implementing regulations issued by the awarding agency [Appendix II to 2 CFR Part 200].

Clean Air Act (42 U.S.C. 7401–7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251–1387): As amended—The CONTRACTOR agrees to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401–7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251–1387). Violations must be reported to the federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA) [Appendix II to 2 CFR Part 200].

Debarment and Suspension (Executive Orders 12549 and 12689): A contract award (see 2 CFR 180.220) will not be made to parties listed on the government wide exclusions in the System for Award Management (SAM), in accordance with the OMB guidelines at 2 CFR 180 that implement Executive Orders 12549 (3 CFR part 1986 Comp., p. 189) and 12689 (3 CFR part 1989 Comp., p. 235), “Debarment and

Suspension.” SAM Exclusions contains the names of parties debarred, suspended, or otherwise excluded by agencies, as well as parties declared ineligible under statutory or regulatory authority other than Executive Order 12549. If applicable, the CONTRACTOR must verify that none of their subcontractors (for contracts expected to equal or exceed \$25,000), appear on the federal government’s Excluded Parties List. The Excluded Parties List is accessible at <https://uscontractorregistration.com/> [Appendix II to 2 CFR Part 200].

Byrd Anti-Lobbying Amendment (31 U.S.C. 1352): CONTRACTORs that apply or bid for an award **exceeding \$100,000** must submit a completed “Disclosure of Lobbying Activities” [Form SF-LLL]. Each tier certifies to the tier above that it will not and has not used federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any federal contract, grant or any other award covered by 31 U.S.C. 1352. Each tier must also disclose any lobbying with *non-federal funds* that takes place in connection with obtaining any federal award. Such disclosures are forwarded from tier to tier up to the non-federal award. [Appendix II to 2 CFR Part 200]. **The bidder shall complete Form SF-LLL and submit with bid. Bidders may be deemed non-responsive for failure to submit this certification.**

Conflict of Interest [2 CFR §200.112]: The CONTRACTOR must disclose in writing any potential conflict of interest to the Federal awarding agency or COUNTY in accordance with applicable Federal awarding agency policy.

Mandatory Disclosures [2 CFR §200.113]: The CONTRACTOR must disclose in writing all violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Failure to make required disclosures can result in any of the remedies described in 2 CFR §200.338 Remedies for noncompliance, including suspension or debarment.

Protected Personally Identifiable Information (Protected PII) [CFR §200.303(e)]: The CONTRACTOR must take reasonable measures to safeguard protected personally identifiable information and other information the federal awarding agency or COUNTY designates as sensitive or the County considers sensitive consistent with other applicable federal, state, and local laws regarding privacy and obligations of confidentiality. Per CFR § 200.82, Protected PII means an individual's first name or first initial and last name in combination with any one or more types of information, including, but not limited to, social security number, passport number, credit card numbers, clearances, bank numbers, biometrics, date and place of birth, mother's maiden name, criminal, medical and financial records, and/or educational transcripts. This does not include PII that is required by law to be disclosed.

Prohibition on utilization of time and material type contracts [2 CFR §200.318 (j) (1)]: The COUNTY will not award contracts based on a time and material basis if the contract contains federal funding.

Contracting with Small and Minority Businesses, Women's Business Enterprises, and Labor Surplus Area Firms [2 CFR § 200.321]: If using subcontractors, the CONTRACTOR must take all necessary affirmative steps to assure that minority businesses, women's business enterprises, and labor surplus area firms are used when possible. Affirmative steps must include:

(1) Placing qualified small and minority businesses and women's business enterprises on solicitation lists;

(2) Assuring that small and minority businesses, and women's business enterprises are solicited whenever they are potential sources;

(3) Dividing total requirements, when economically feasible, into smaller tasks or quantities to permit maximum participation by small and minority businesses, and women's business enterprises;

(4) Establishing delivery schedules, where the requirement permits, which encourage participation by small and minority businesses, and women's business enterprises; (5) Using the services and assistance, as appropriate, of such organizations as the Small Business Administration and the Minority Business Development Agency of the Department of Commerce.

(5) Affirmative Action Requirements per 41 CFR60-4.1 Goals for Women and Minorities in Construction (for contracts in excess of \$10,000): Goals and timetables for minority and female utilization may be set which shall be based on appropriate workforce, demographic or other relevant data and which shall cover construction projects or construction contracts performed in specific geographical areas. The goals, which shall be applicable to each construction trade in a covered Contractor's or subcontractor's entire workforce which is working in the area covered by the goals and timetables, shall be published as notices in the Federal Register, and shall be inserted by the contracting officers and applicants, as applicable, in the Notice required by 41 CFR 60-4.2. Covered construction Contractors performing construction work in geographical areas where they do not have a federal or federally assisted construction contract shall apply the minority and female goals established for the geographical area where the work is being performed.

Information regarding certified M/WBE firms can be obtained from:

- Florida Department of Management Services (Office of Supplier Diversity);
- Florida Department of Transportation;
- Minority Business Development Center in most large cities; and
- Local Government M/DBE programs in many large counties and cities

Procurement of Recovered Materials [2 CFR §200.322]: CONTRACTOR must comply with section 6002 of the Solid Waste Disposal Act, as amended by the Resource Conservation and Recovery Act. The requirements of Section 6002 include procuring only items designated in guidelines of the Environmental Protection Agency (EPA) at 40 CFR part 247 that contain the highest percentage of recovered materials practicable, consistent with maintaining a satisfactory level of competition, where the purchase price of the item exceeds \$10,000 or the value of the quantity acquired during the preceding fiscal year exceeded \$10,000; procuring solid waste management services in a manner that maximizes energy and resource recovery; and establishing an affirmative procurement program for procurement of recovered materials identified in the EPA guidelines.

Prohibition on utilization of cost plus a percentage of cost contracts [2 CFR §200.323 (d)]: The COUNTY will not award contracts containing federal funding on a cost plus percentage of cost basis.

Retention of Records [2 CFR 200.333]: Financial records, supporting documents, statistical records, and all other records pertinent to a Federal award must be retained for a period of three years from the date of submission of the final expenditure report or invoice.

Access to Records [2 CFR 200 § 200.336]: The County, Pass-through agency or Federal awarding agency must have the right of timely and unrestricted access to any documents, papers or other records, including electronic records, of the Contractor in order to make audits, investigations, examinations, excerpts, transcripts, and copies of such documents. This right also includes timely and reasonable access to the recipient purpose of interview and discussion related to such documents. This right of access shall continue as long as records are required to be retained.

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

1. * Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. * Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input checked="" type="checkbox"/> c. post-award	3. * Report Type: <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change
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4. Name and Address of Reporting Entity:
☐ Prime ☒ SubAwardee Tier if known: ☐

* Name:

* Street 1: Street 2:

* City: State: Zip:

Congressional District, if known:

5. If Reporting Entity in No.4 is Subawardee, Enter Name and Address of Prime:

* Name:

* Street 1: Street 2:

* City: State: Zip:

Congressional District, if known:

6. * Federal Department/Agency: <div style="background-color: yellow; border: 1px solid black; height: 20px; width: 100%;"></div>	7. * Federal Program Name/Description: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
8. Federal Action Number, if known: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	9. Award Amount, if known: \$

10. a. Name and Address of Lobbying Registrant:

Prefix: * First Name: Middle Name:

* Last Name: Suffix:

* Street 1: Street 2:

* City: State: Zip:

b. Individual Performing Services (including address if different from No. 10a)

Prefix: * First Name: Middle Name:

* Last Name: Suffix:

* Street 1: Street 2:

* City: State: Zip:

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

* Signature:

* Name: Prefix: * First Name: Middle Name:

* Last Name: Suffix:

Title: Telephone No.: Date:

Federal Use Only:

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