



MARION COUNTY BOARD OF COMMISSIONERS

Board Session Agenda Review Form

Meeting date: June 19, 2019

Department: Health & Human Services Agenda Planning Date: May 30, 2019 Time required: 10

Audio/Visual aids

Contact: Katrina Rothenberger, Division Director Phone: 503.373.3787

Department Head Signature: [Handwritten Signature]

TITLE Oregon Health Authority 2017-2019 Amendment #18 to the IGA for the Financing of Public Health Services #154123

Issue, Description & Background Oregon Health Authority Biennium 2017-2019 IGA #154123 with Marion County Health and Human Services Department is to operate and contract for the operation of Public Health Services in accordance with the policies, procedures and administrative rules of the OHA. Amendment 18 is as follows: add \$14,000 to Program Element 46-01- Reproductive Health Community Participation and Assurance of Access funds.

Financial Impacts: IGA #154123 biennium total through Amendment 17 is \$5,477,622. Amendment 18 adds \$14,000 in funds. The new IGA biennium total is \$5,491,622.

Impacts to Department & External Agencies The Health and Human Services Department anticipates no impact on other departments.

Options for Consideration: 1. Approve Amendment 18 to OHA IGA #154123 for the Financing of Public Health Services. 2. Deny approval of Amendment 18 to OHA IGA #154123. 3. Take no action at this time.

Recommendation: The Health and Human Services Department recommends approval of Amendment 18 to OHA IGA #154123 for Financing of Public Health Services

List of attachments: Amendment 18 to OHA IGA #154123 for Financing of Public Health Services

Presenter: Katrina Rothenberger, Division Director

Copies of completed paperwork sent to the following: (Include names and e-mail addresses.)

Copies to: Rebecca Werner rwerner@co.marion.or.us



**Marion County**  
OREGON  
FINANCE DEPARTMENT

# Contract Review Sheet

Contract #: HE-1571-17(IGA #154123)

Person Sending: Rebecca Werner Department: Health and Human Services

Contact Phone #: 503-361-2795 Date Sent: \_\_\_\_\_

Contract  Amendment# 18  Lease  IGA  MOU  Grant (attach approved grant award transmittal form)

Title: 2017-2019 IGA for the Financing of Public Health Services

Contractor's Name: Oregon Health Authority (OHA)

Term - Date From: July 1, 2017 Expires: June 30, 2019

Contract Total: \$5,477,622.00 Amendment Amount: \$14,000.00 New Contract Total: \$5,491,622.00

Source Selection Method: \_\_\_\_\_ # \_\_\_\_\_

### Additional Considerations (check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Board Order# _____   | <input type="checkbox"/> Feasibility Determination (attach approved form)           |
| <input type="checkbox"/> Incoming Funds   | <input type="checkbox"/> Federal Funds (attach sub-recipient / contractor analysis) |
| <input type="checkbox"/> Independent Contractor (LECS) approval date: _____                 | <input type="checkbox"/> Reinstatement (attach written justification)               |
| <input type="checkbox"/> Insurance Waiver (attach)  | <input type="checkbox"/> Retroactive (attach written justification)                 |
| <input type="checkbox"/> CIP# _____ (required for all goods /software greater than \$5,000) |   |

### Description of Services or Grant Award:

**HEALTH AND HUMAN SERVICES**  
For approval of Amendment #18 with the Oregon Health Authority to add \$14,000 in Reproductive Health Community Participation & Assurance of Access funds under the 2017-19 Intergovernmental Agreement for financing of public health services.

**FOR FINANCE USE**

Date Finance Received: \_\_\_\_\_ BOC Planning Date: \_\_\_\_\_ Date Legal Received: \_\_\_\_\_

Comments: \_\_\_\_\_

### REQUIRED APPROVALS:

Finance - Contracts \_\_\_\_\_ Date \_\_\_\_\_ Risk Manager \_\_\_\_\_ Date \_\_\_\_\_

Legal Counsel \_\_\_\_\_ Date \_\_\_\_\_ Chief Administrative Officer \_\_\_\_\_ Date \_\_\_\_\_

Date \_\_\_\_\_  To be filed  Added to master list

Returned to \_\_\_\_\_ Department for \_\_\_\_\_ signatures

Agreement #154123



**EIGHTEENTH AMENDMENT TO OREGON HEALTH AUTHORITY  
2017-2019 INTERGOVERNMENTAL AGREEMENT FOR THE  
FINANCING OF PUBLIC HEALTH SERVICES**

In compliance with the Americans with Disabilities Act, this document is available in alternate formats such as Braille, large print, audio recordings, Web-based communications and other electronic formats. To request an alternate format, please send an e-mail to [dhs-oha.publicationrequest@state.or.us](mailto:dhs-oha.publicationrequest@state.or.us) or call 503-378-3486 (voice) or 503-378-3523 (TTY) to arrange for the alternative format.

This Eighteenth Amendment to Oregon Health Authority 2017-2019 Intergovernmental Agreement for the Financing of Public Health Services, effective July 1, 2017, and restated July 1, 2018 (as amended the "Agreement"), is between the State of Oregon acting by and through its Oregon Health Authority ("OHA") and Marion County, acting by and through its Health & Human Services ("LPHA"), the entity designated, pursuant to ORS 431.003, as the Local Public Health Authority for Marion County.

**RECITALS**

WHEREAS, OHA and LPHA wish to modify the Fiscal Year 2019 (FY19) Financial Assistance Award set forth in Exhibit C of the Agreement.

WHEREAS, OHA and LPHA wish to modify the Exhibit J information required by 2 CFR Subtitle B with guidance at 2 CFR Part 200.

NOW, THEREFORE, in consideration of the premises, covenants and agreements contained herein and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties hereto agree as follows

**AGREEMENT**

1. Section 1 of Exhibit C entitled "Financial Assistance Award" of the Agreement for FY19 is hereby superseded and replaced in its entirety by Attachment A attached hereto and incorporated herein by this reference. Attachment A must be read in conjunction with Section 3 of Exhibit C as restated July 1, 2018, entitled "Explanation of Financial Assistance Award" of the Agreement.
2. Exhibit J "Information required by 2 CFR Subtitle B with guidance at 2 CFR Part 200" is amended to add to the federal award information datasheet as set forth in Attachment B, attached hereto and incorporated herein by this reference.
3. LPHA represents and warrants to OHA that the representations and warranties of LPHA set forth in Section 2 of Exhibit E of the Agreement are true and correct on the date hereof with the same effect as if made on the date hereof.
4. Capitalized words and phrases used but not defined herein shall have the meanings ascribed thereto in the Agreement.
5. Except as amended hereby, all terms and conditions of the Agreement remain in full force and effect.
6. The parties expressly ratify the Agreement as herein amended.
7. This Amendment may be executed in any number of counterparts, all of which when taken together shall constitute one agreement binding on all parties, notwithstanding that all parties are not signatories to the same counterpart. Each copy of this Amendment so executed shall constitute an original.

8. This Amendment becomes effective on the date of the last signature below.

IN WITNESS WHEREOF, the parties hereto have executed this Amendment as of the dates set forth below their respective signatures.

9. Signatures.

By: \_\_\_\_\_  
Name: /for/ Lillian Shirley, BSN, MPH, MPA  
Title: Public Health Director  
Date: \_\_\_\_\_

MARION COUNTY LOCAL PUBLIC HEALTH AUTHORITY

By: \_\_\_\_\_  
Name: Cary D Moller  
Title: Administrator  
Date: 3/21/19

DEPARTMENT OF JUSTICE – APPROVED FOR LEGAL SUFFICIENCY

*Agreement form group-approved by D. Kevin Carlson, Assistant Attorney General, Tax and Finance Section, General Counsel Division, Oregon Department of Justice by email on August 16, 2018, copy of email approval in Agreement file.*

REVIEWED BY OHA PUBLIC HEALTH ADMINISTRATION

By: \_\_\_\_\_  
Name: Derrick Clark (or designee)  
Title: Program Support Manager  
Date: \_\_\_\_\_

Oregon Health Authority  
2017-2019 Intergovernmental Agreement  
for the Financing of Public Health Services

MARION COUNTY SIGNATURE PAGE  
BOARD OF COMMISSIONERS:

\_\_\_\_\_  
Chair Date

\_\_\_\_\_  
Commissioner Date

\_\_\_\_\_  
Commissioner Date

 5/20/19  
\_\_\_\_\_  
Katrina Rothenberger, Division Director Date

Fund Verification Service Code: Various  
Account: Various

 5/20/19  
\_\_\_\_\_  
Jeremiah Elliot, Sr. Administrative Svcs Mgr Date

APPROVED AS TO FORM:

\_\_\_\_\_  
Marion County Legal Counsel Date

\_\_\_\_\_  
Marion County Contracts and Procurement Date

\_\_\_\_\_  
Chief Administrative Officer Date

**Attachment A  
Financial Assistance Award (FY19)**

State of Oregon Oregon Health Authority Public Health Division			Page 1 of 3	
<b>1) Grantee</b> Name: Marion County  Street: 3180 Center St. NE, Suite 2100 City: Salem State: OR Zip Code: 97301		<b>2) Issue Date</b> April 10, 2019	<b>This Action</b> AMENDMENT FY 2019	
		<b>3) Award Period</b> From July 1, 2018 Through June 30, 2019		
<b>4) OHA Public Health Funds Approved</b>				
Program	Award Balance	Increase/ (Decrease)	New Award Bal	
PE01 State Support for Public Health	399,831	0	399,831	
PE03 Tuberculosis Case Management	0		0	
PE07 HIV Prevention Services	106,877		106,877	
PE12 Public Health Emergency Preparedness and Response (PHEP)	160,497		160,497	
PE13 Tobacco Prevention and Education Program (TPEP)	199,898		199,898	
PE40-01 WIC NSA: July - September	271,556		271,556	
PE40-02 WIC NSA: October - June	758,669		758,669	
PE40-03 BFPC: July - September	26,418		26,418	
PE40-04 BFPC: October - June	57,870		57,870	
PE40-05 Farmer's Market	4,025		4,025	
PE41 Reproductive Health Program	25,379		25,379	
PE42-01 MCAH Title V CAH (FY18-19)	34,726		34,726	
PE42-02 MCAH Title V Flexible Funds (FY18-19)	81,028		81,028	
PE42-03 MCAH Perinatal General Funds & Title XIX	11,884		11,884	
PE42-04 MCAH Babies First! General Funds	37,968		37,968	
PE42-05 MCAH Oregon Mothers Care Title V (FY18-19)	7,580		7,580	
PE42-06 MCAH General Funds & Title XIX	22,296		22,296	
PE43 Public Health Practice (PHP) - Immunization Services (Vendors)	97,728		97,728	

State of Oregon Oregon Health Authority Public Health Division			Page 2 of 3	
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<b>4) OHA Public Health Funds Approved</b>				
	<b>Program</b>	<b>Award Balance</b>	<b>Increase/ (Decrease)</b>	<b>New Award Bal</b>
PE46	RH Community Participation & Assurance of Access	41,251		41,251
PE46-01	RH Community Participation & Assurance of Access - (April-June)	0	14,000	14,000
PE50	Safe Drinking Water (SDW) Program (Vendors)	118,881		118,881
PE51	Public Health Modernization Implementation	377,541		377,541
		2,841,903	14,000	2,855,903
<b>5) Foot Notes:</b>				
PE03	1	Tuberculosis funding has been changed to a fee for service model.		
PE12	1	02/2019 Footnote: Funding being added to all LPHAs for the purpose of sending staff to Oregon Prepared Workshop in March, 2019 and OR-EPI in April 2019.		
PE40-01	1	Award for July - September should be spent by 9/30/18		
PE40-02	1	Award for October - June should be spent by 6/30/19		
PE40-03	1	Award for July - September to be spent by 9/30/18		
PE40-04	1	Award October - June to be spent by 6/30/19		
PE40-05	1	Award is one-time funding to be spent by 11/30/18		
PE41	1	Funding Period is for two month - 7/1/18 - 8/31/18 - Funds must be expended by August 31, 2018		
PE42-01	1	For all MCH funds: Funds will not be shifted between categories or fund types. The same program may be funded by more than one fund type, however, federal funds may not be used as match for other federal funds (such as Medicaid).		
PE42-01	2	Funds for the MCH Title V programs: Flexible funds, Child & Adolescent Health, and Oregon MothersCare for the period 7/1/18 - 9/30/18 must be spent by 9/30/18.		
PE42-02	1	For all MCH funds: Funds will not be shifted between categories or fund types. The same program may be funded by more than one fund type, however, federal funds may not be used as match for other federal funds (such as Medicaid).		
PE42-02	2	Funds for the MCH Title V programs: Flexible funds, Child & Adolescent Health, and Oregon MothersCare for the period 7/1/18 - 9/30/18 must be spent by 9/30/18.		
PE42-03	1	Funds will not be shifted between categories or fund types. The same program may be funded by more than one fund type, however, federal funds may not be used as match for other federal funds (such as Medicaid).		
PE42-04	1	For all MCH funds: Funds will not be shifted between categories or fund types. The same program may be funded by more than one fund type, however, federal funds may not be used as match for other federal funds (such as Medicaid).		
PE42-05	1	For all MCH funds: Funds will not be shifted between categories or fund types. The same program may be funded by more than one fund type, however, federal funds may not be used as match for other federal funds (such as Medicaid).		
PE42-05	2	Funds for the MCH Title V programs: Flexible funds, Child & Adolescent Health, and Oregon MothersCare for the period 7/1/18 - 9/30/18 must be spent by 9/30/18.		
PE42-06	1	For all MCH funds: Funds will not be shifted between categories or fund types. The same program may be funded by more than one fund type, however, federal funds may not be used as match for other federal funds (such as Medicaid).		

State of Oregon Oregon Health Authority Public Health Division			Page 3 of 3
<b>1) Grantee</b> Name: Marion County  Street: 3180 Center St. NE, Suite 2100 City: Salem State: OR      Zip Code: 97301	<b>2) Issue Date</b> April 10, 2019	<b>This Action</b> AMENDMENT FY 2019	
		<b>3) Award Period</b> From July 1, 2018 Through June 30, 2019	
<b>4) OHA Public Health Funds Approved</b>			
<b>Program</b>	<b>Award Balance</b>	<b>Increase/ (Decrease)</b>	<b>New Award Bal</b>
PE43    1	All Award Must be Spent by the End of June 30, 2019		
PE43    2	Immunization Special Payments is Funded by State General Fund and Matched dollar for Dollar with Federal Medicaid Match.		
PE46-01   1	Award period is April 1, 2019 through June 30, 2019. Fund must be expended by June 30, 2019		
<b>6) Comments:</b>			
PE03    \$4,144 must be spent by 12/31/18 PE07    \$32,976 must be spent by 12/31/18 PE40-01 Nutrition Ed of \$50,311 & BF of \$9,196 to be spent by 9/30/18 PE40-02 Nutrition Ed of \$150,934, BF of \$27,589 to be spent by 6/30/19 PE40-02 \$4,000 for clinic improvement PE40-04 3/2019: Marion County is ending BFPC services effective 4/18/2019 \$-21,348 of the current award is being reduced to reflect this PE42-01 \$9,530 must be spent from 7/1/18 to 9/30/18. \$28,589 must be spent from 10/1/18 to 6/30/19. PE42-01 3/2019: Deobligating \$3,392.97 (\$9,530 Q1 award - \$6,137.03 Q1 reported expenses) for PE42-01, FY19 Q1 award which had to be spent by 9/30/18. PE42-02 \$22,236 must be spent from 7/1/18 to 9/30/18. \$66,708 must be spent from 10/1/18 to 6/30/19. PE42-02 3/2019: Deobligating \$7,916.32 (\$22,236 Q1 award - \$14,319.68 Q1 reported expenses) for PE42-02, FY19 Q1 award which had to be spent by 9/30/18. PE42-05 \$1,895 must be spent from 7/1/18 to 9/30/18. \$5,685 must be spent from 10/1/18 to 6/30/19. PE46    PE46 7 Month award 9/1/18 to 3/31/19 PE50    \$10,699 must be spent from 7/1/18 to 9/30/18. \$32,098 must be spent from 10/1/18 to 6/30/19. (for portion of award with federal funding source CFDA 66.432) PE50    2/15/19: Remove prior comments regarding funding limitations and dates. PE51    Total budget for 12/1/2017 to 6/30/2019 (19 months) is \$463,238 PE51    \$84,970 is rollover of unspent award from SFY 2018 and must be spent by 6/30/2019.			
<b>7) Capital outlay Requested in this Action:</b> Prior approval is required for Capital Outlay. Capital Outlay is defined as an expenditure for equipment with a purchase price in excess of \$5,000 and a life expectancy greater than one year.			
<b>PROGRAM</b>	<b>ITEM DESCRIPTION</b>	<b>COST</b>	<b>PROG APPROV</b>



**Attachment B**  
**Information required by CFR Subtitle B with guidance at 2 CFR Part 200**

**PE46-01: RH Community Participation & Assurance of Access (April - June 2019)**  
Funding Information Table

Federal Award Identification Number (FAIN):	1 FPHPA006442-01-00
Federal Award Date:	4/1/2019
Performance Period:	4/1/19 - 3/31/20
Federal Awarding Agency:	DHHS/OPA
CFDA Number:	93.217
CFDA Name:	Family Planning Services
Total Federal Award:	\$3,100,000
Project Description:	Oregon Reproductive
Awarding Official:	Mr. Reyna Jesus
Indirect Cost Rate:	17.15%
Research and Development (Y/N):	No

**PCA:** 52822

**INDEX:** 50333

Agency/Contractor	DUNS	Amount
Marion	50973718	\$14,000