

**PACIFIC COUNTY PUBLIC HEALTH & HUMAN SERVICES DEPARTMENT  
2022-2024 CONSOLIDATED CONTRACT**

**CONTRACT NUMBER: CLH31022****AMENDMENT NUMBER: 11**

PURPOSE OF CHANGE: To amend this contract between the DEPARTMENT OF HEALTH hereinafter referred to as "DOH", and PACIFIC COUNTY PUBLIC HEALTH & HUMAN SERVICES DEPARTMENT, a Local Health Jurisdiction, hereinafter referred to as "LHJ", pursuant to the Modifications/Waivers clause, and to make necessary changes within the scope of this contract and any subsequent amendments thereto.

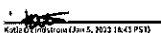

IT IS MUTUALLY AGREED: That the contract is hereby amended as follows:

1. Exhibit A Statements of Work, includes the following statements of work, which are incorporated by this reference and located on the DOH Finance SharePoint site in the Upload Center at the following URL:  
<https://stateofwa.sharepoint.com/sites/doh-ofsfundingresources/sitepages/home.aspx?e1:9a94688da2d94d3ea80ac7fbc32e4d7c>
  - ☐ Adds Statements of Work for the following programs:
  - ☒ Amends Statements of Work for the following programs:  
 Office of Immunization COVID-19 Vaccine - Effective January 1, 2022  
 Sexual & Reproductive Health Program - Effective January 1, 2022  
 WIC Nutrition Program - Effective January 1, 2022
  - ☐ Deletes Statements of Work for the following programs:
2. Exhibit B-11 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-10 Allocations as follows:
  - ☒ Increase of **\$111,310** for a revised maximum consideration of **\$3,165,702**.
  - ☐ Decrease of \_\_\_\_\_ for a revised maximum consideration of \_\_\_\_\_.
  - ☐ No change in the maximum consideration of \_\_\_\_\_.  
 Exhibit B Allocations are attached only for informational purposes.

Unless designated otherwise herein, the effective date of this amendment is the date of execution.

ALL OTHER TERMS AND CONDITIONS of the original contract and any subsequent amendments remain in full force and effect.

IN WITNESS WHEREOF, the undersigned has affixed his/her signature in execution thereof.

PACIFIC COUNTY PUBLIC HEALTH & HUMAN SERVICES DEPARTMENT	STATE OF WASHINGTON DEPARTMENT OF HEALTH
Signature:  <small>Katie O'Neil (Jan 5, 2023 10:43 PST)</small>	Signature:  <small>Brenda Henrikson (Jan 9, 2023 10:31 PST)</small>
Date: Jan 5, 2023	Date: Jan 9, 2023

APPROVED AS TO FORM ONLY  
Assistant Attorney General

Indirect Rate January 1, 2022 through December 31, 2022: 12.87%

Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**	Statement of Work		DOH Use Only		Amount	Funding Period SubTotal	Chart of Accounts Total
					LHJ Funding Period Start Date	LHJ Funding Period End Date	Funding Period Start Date	Funding Period End Date			
FFY23 USDA BFPC Prog Mgmt	NGA Not Received	Amd 11	10.557	333.10.55	10/01/22	09/30/23	10/01/22	09/30/23	\$10,955	\$14,607	\$25,562
FFY23 USDA BFPC Prog Mgmt	NGA Not Received	Amd 8, 11	10.557	333.10.55	10/01/22	09/30/23	10/01/22	09/30/23	\$3,652		
FFY22 USDA BFPC Prog Mgmt	7WA700WA1	Amd 1	10.557	333.10.55	01/01/22	09/30/22	10/01/21	09/30/22	\$10,955	\$10,955	
FFY24 USDA WIC Client Svs Contracts	NGA Not Received	Amd 11	10.557	333.10.55	10/01/23	12/31/23	10/01/23	12/31/23	\$21,300	\$21,300	\$167,375
FFY23 USDA WIC Client Svs Contracts	NGA Not Received	Amd 11	10.557	333.10.55	10/01/22	09/30/23	10/01/22	09/30/23	\$63,900	\$84,600	
FFY23 USDA WIC Client Svs Contracts	NGA Not Received	Amd 9	10.557	333.10.55	10/01/22	09/30/23	10/01/22	09/30/23	\$1,375		
FFY23 USDA WIC Client Svs Contracts	NGA Not Received	Amd 1	10.557	333.10.55	10/01/22	09/30/23	10/01/22	09/30/23	\$19,325		
FFY22 USDA WIC Client Svs Contracts	7WA700WA7	Amd 1	10.557	333.10.55	01/01/22	09/30/22	10/01/21	09/30/22	\$61,475	\$61,475	
FFY23 USDA WIC Prog Mgmt CSS	NGA Not Received	Amd 11	10.557	333.10.57	01/01/23	09/30/23	10/01/22	09/30/23	\$2,400	\$2,400	\$2,400
FFY22 USDA WIC Nutrition Ed	7WA700WA7	Amd 5	10.557	333.10.57	01/01/22	09/30/22	06/01/21	09/30/22	\$2,500	\$2,500	\$2,500
FFY22 USDA FMNP Prog Mgmt	7WA810WA7	Amd 4	10.572	333.10.57	05/01/22	09/30/22	10/01/21	09/30/22	\$331	\$331	\$331
CSFRF CTS LHJ Allocation	NGA Not Received	Amd 10	21.027	333.21.02	11/01/22	06/30/23	11/01/22	06/30/23	\$48,447	\$48,447	\$48,447
LHJ Vaccination ARPA	NGA Not Received	Amd 10	21.027	333.21.02	11/01/22	06/30/23	11/01/22	06/30/23	\$26,962	\$26,962	\$26,962
FFY22 PHEP BP4 LHJ Funding	NU90TP922043	Amd 7	93.069	333.93.06	07/01/22	06/30/23	07/01/22	06/30/23	\$25,178	\$25,178	\$44,704
FFY21 PHEP BP3 LHJ Funding	NU90TP922043	Amd 3	93.069	333.93.06	01/01/22	06/30/22	07/01/21	06/30/22	\$19,526	\$19,526	
FFY22 Title X Dire Needs	FPHPA006495	Amd 2	93.217	333.93.21	01/14/22	03/31/22	01/14/22	03/31/22	\$1,319	\$1,319	\$1,319
FFY22 Title X Family Planning	FPHPA006560	Amd 5	93.217	333.93.21	04/01/22	03/31/23	04/01/22	03/31/23	\$11,568	\$11,568	\$11,568
COVID19 Vaccines	NH23IP922619	Amd 4	93.268	333.93.26	01/01/22	06/30/24	07/01/20	06/30/24	\$262,616	\$262,616	\$262,616
COVID19 Vaccines R4	NH23IP922619	Amd 1	93.268	333.93.26	01/01/22	06/30/24	07/01/20	06/30/24	\$354,803	\$354,803	\$354,803
FFY23 VFC Ops	NH23IP922619	Amd 5	93.268	333.93.26	07/01/22	06/30/23	07/01/22	06/30/23	\$5,600	\$5,600	\$11,200
FFY22 VFC Ops	NH23IP922619	Amd 3	93.268	333.93.26	01/01/22	06/30/22	07/01/21	06/30/22	\$5,600	\$5,600	
FFY19 COVID CARES	NU50CK000515	Amd 2	93.323	333.93.32	01/01/22	04/22/22	04/23/20	07/31/24	\$306	\$306	\$306
FFY19 ELC COVID Ed LHJ Allocation	NU50CK000515	Amd 2	93.323	333.93.32	01/01/22	10/18/22	05/19/20	10/18/22	\$3	\$3	\$3
FFY20 ELC EDE LHJ Allocation	NU50CK000515	Amd 7, 9	93.323	333.93.32	01/01/22	07/31/23	01/15/21	07/31/24	(\$7,909)	\$403,997	\$403,997
FFY20 ELC EDE LHJ Allocation	NU50CK000515	Amd 2, 9	93.323	333.93.32	01/01/22	07/31/23	01/15/21	07/31/24	\$411,906		

Chart of Accounts Program Title	Federal Award Identification #	Amend #	Assist List #*	BARS Revenue Code**	Statement of Work		DOH Use Only		Amount	Funding Period Sub Total	Chart of Accounts Total
					LHIJ Funding Period Start Date	LHIJ Funding Period End Date	Chart of Accounts Funding Period Start Date	Chart of Accounts Funding Period End Date			
FFY23 MCHBG LHI Contracts	NGA Not Received	Amnd 7	93.994	333.93.99	10/01/22	09/30/23	10/01/22	09/30/23	\$37,634	\$37,634	\$69,035
FFY22 MCHBG LHI Contracts	B04MC45251	Amnd 4	93.994	333.93.99	01/01/22	09/30/22	10/01/21	09/30/22	\$3,176	\$31,401	
FFY22 MCHBG LHI Contracts	B04MC45251	Amnd 1	93.994	333.93.99	01/01/22	09/30/22	10/01/21	09/30/22	\$28,225		
SFY23 Sexual & Rep Hlth Cost Share		Amnd 11	N/A	334.04.91	07/01/22	06/30/23	07/01/22	06/30/23	\$12,755	\$25,469	\$39,874
SFY23 Sexual & Rep Hlth Cost Share		Amnd 7, 11	N/A	334.04.91	07/01/22	06/30/23	07/01/22	06/30/23	\$12,714		
SFY22 Sexual & Rep Hlth Cost Share		Amnd 5	N/A	334.04.91	01/01/22	06/30/22	07/01/21	06/30/22	\$744	\$14,405	
SFY22 Sexual & Rep Hlth Cost Share		Amnd 1	N/A	334.04.91	01/01/22	06/30/22	07/01/21	06/30/22	\$13,661		
Rec Shellfish/Biotoxin		Amnd 1	N/A	334.04.93	01/01/22	06/30/23	07/01/21	06/30/23	\$2,400	\$2,400	\$2,400
NACDD BRIC Grant Year 2		Amnd 4	N/A	334.04.98	01/01/22	07/31/23	01/01/22	07/31/23	\$23,500	\$23,500	\$42,800
NACDD BRIC Grant		Amnd 4	N/A	334.04.98	01/01/22	07/31/22	01/01/22	07/31/22	\$19,300	\$19,300	
FPHS-LHI-Propviso (YR2)		Amnd 6	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	\$1,087,000	\$1,087,000	\$1,647,500
FPHS-LHI-Propviso (YR2)		Amnd 7	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	(\$674,000)	\$0	
FPHS-LHI-Propviso (YR2)		Amnd 1	N/A	336.04.25	07/01/22	06/30/23	07/01/21	06/30/23	\$674,000		
FPHS-LHI-Propviso (YR1)		Amnd 9	N/A	336.04.25	01/01/22	06/30/22	07/01/21	06/30/23	\$73,750	\$560,500	
FPHS-LHI-Propviso (YR1)		Amnd 4	N/A	336.04.25	01/01/22	06/30/22	07/01/21	06/30/23	(\$162,250)		
FPHS-LHI-Propviso (YR1)		Amnd 1	N/A	336.04.25	01/01/22	06/30/22	07/01/21	06/30/23	\$649,000		
<b>TOTAL</b>									<b>\$3,165,702</b>	<b>\$3,165,702</b>	
<b>Total consideration:</b>	<b>\$3,054,392</b>									<b>GRAND TOTAL</b>	<b>\$3,165,702</b>
<b>GRAND TOTAL</b>	<b>\$111,310</b>									<b>Total Fed</b>	<b>\$1,433,128</b>
	<b>\$3,165,702</b>									<b>Total State</b>	<b>\$1,732,574</b>

\*Catalog of Federal Domestic Assistance  
 \*\*Federal revenue codes begin with "333". State revenue codes begin with "334".

**Exhibit A**  
**Statement of Work**  
**Contract Term: 2022-2024**

**DOH Program Name or Title:** Office of Immunization COVID-19 Vaccine -  
Effective January 1, 2022

**Local Health Jurisdiction Name:** Pacific County Public Health & Human  
Services Department  
**Contract Number:** CLH31022

**SOW Type:** Revision      **Revision # (for this SOW)** 2

**Period of Performance:** January 1, 2022 through June 30, 2024

<b>Funding Source</b> <input checked="" type="checkbox"/> Federal Subrecipient <input type="checkbox"/> State <input type="checkbox"/> Other	<b>Federal Compliance</b> (check if applicable) <input checked="" type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development	<b>Type of Payment</b> <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
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**Statement of Work Purpose:** The purpose of this statement of work (SOW) is to provide funding to conduct COVID-19 vaccine activities.

**Revision Purpose:** The purpose of this revision is to modify activities, deliverables, and deliverable due dates.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date End Date	Current Allocation	Allocation Change None	Total Allocation
COVID19 Vaccines R4	74310230	93.268	333.93.26	01/01/22 06/30/24	354,803	0	354,803
COVID 19 Vaccines	74310229	93.268	333.93.26	01/01/22 06/30/24	262,616	0	262,616
					0	0	0
					0	0	0
					0	0	0
					0	0	0
<b>TOTALS</b>					<b>617,419</b>	<b>0</b>	<b>617,419</b>

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
<p>The purpose of this statement of work is to identify activities and provide funding to support COVID vaccine response outreach, education, and operations. The activities may include other vaccines recommended for the audience population, as long as COVID vaccine is the primary focus and references to other vaccines are secondary.</p>				
3.A	<p>Identify activity/activities to support COVID vaccine response in your community, using the examples below as a guideline.</p> <p><b>Example 1:</b> Develop and implement communication strategies with health care providers, community, and/or other partners to help build vaccine confidence broadly and among groups anticipated to receive early vaccination, as well as dispel vaccine misinformation. Document and provide a plan that shows the communication strategies used with health care providers and other partners and the locally identified population anticipated to reach.</p>	Summary of the engagement strategies to be used with health care providers and other partners, and the locally identified population to be reached.	January 31, Annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<b>Example 2:</b> Engage in other vaccination planning activities such as partnership development, provider education, vaccination point of dispensing (POD) planning, tabletop exercises, engagement with communities, leaders, non-traditional provider, or vulnerable populations to develop strategies to ensure equitable access to vaccination services			
3.B	Implement the communication strategies or other activities, working with health care providers and other partners to reach the locally identified population, support providers in vaccination plans, and support equitable access to vaccination services.	<del>After-term</del> written report describing activity/activities and progress made to-date and strategies used (template to be provided)	June 30, Annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
3.C	Catalog activities and conduct an evaluation of the strategies used	<del>Final</del> written report, showing the strategies used and the final progress of the reach (template to be provided)	<del>December 31</del> June 30, annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
3.D	As needed to meet community needs, expand operations to increase vaccine throughput (i.e., providing vaccinations during evenings, overnight, and on weekends). Activities may include vaccine strike teams, mobile vaccine clinics, satellite clinics, temporary, or off-site clinics to travel and provide vaccination services in non-traditional settings, or to supplement the work of local health departments in underserved communities, and may include administration costs for other vaccines co-administered at the events. These activities may be done by the local health department or in collaboration with community partners. (see Restrictions on Funds below)	<del>Quarterly</del> reports summarizing quantity, type, and frequency of activities	<del>March</del> December 31; <del>annually</del> June 30, <del>annually</del>	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
3.E	At the LHJ discretion, provide incentives to persons receiving COVID vaccine, adhering to <i>LHJ Guidance for COVID Initiatives Application</i> requirements and allowable/unallowable use of federal funds.	a. LHJ Incentive Plan Proposal b. <del>Quarterly</del> report that summarizes quantity of incentives purchased and distributed	a. Prior to implementing b. <del>March 31, Annually</del> June 30, Annually	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.
3.F	As needed to meet community needs, perform as a vaccine depot to provide COVID vaccine. Duties include ordering and redistributing of COVID-19 vaccine, assure storage space for minimum order sizes, initiating transfer in the Immunization Information System (IIS), coordinate with providers for physical transport of doses, and maintaining inventory of COVID vaccine by manufacturer.  Immunization COVID-19 funding is specifically required to address COVID-19 vaccination activities. However, the funding can be leveraged to also address and incorporate other non-COVID vaccination activities concurrent to COVID-19	a. Complete a redistribution agreement. b. Report inventory reconciliation page. c. Report lost (expired, spoiled, wasted) vaccine to the IIS d. Report transfer doses in the IIS and VaccineFinder. e. Monitor and maintain vaccine temperature logs from digital data logger and/or the temperature monitoring system for a minimum of 3 years.	a. Submit upon completion b. Reconcile and submit inventory once monthly in the IIS. c. Report lost vaccine within 72 hours in the IIS. d. Update within 24 hours from when transfers occur.	Reimbursement for actual costs incurred, not to exceed total funding consideration amount.

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<i>vaccination activities. For example, COVID vaccine storage and distribution may also support monkeypox vaccine storage and distribution, concurrently</i>		<i>e. Download as needed (retain temperature data on site for 3 years)</i>	

**DOH Program and Fiscal Contact Information** for all ConCon SOWs can be found on the DOH Finance SharePoint site. Questions related to this SOW, or any other finance-related inquiry, may be sent to [finance@doh.wa.gov](mailto:finance@doh.wa.gov).

**Federal Funding Accountability and Transparency Act (FFATA)**

This statement of work is supported by federal funds that require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how the federal funds are spent.

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Unique Entity Identifier (UEI) generated by SAM.gov.

Information about the LHJ and this statement of work will be made available on USASpending.gov by DOH as required by P.L. 109-282.

**Program Specific Requirements**

**Restrictions on Funds (i.e., disallowed expenses or activities, indirect costs, etc.):**

Coverage of co-administration costs for other vaccines administered at vaccination events does NOT apply to the FEMA Mass Vaccination funding. Coverage of co-administration costs only applies to the vaccine funding (COVID19 Vaccine R4, MI 74310230) allocated for Task 3 of the consolidated contract. FEMA Mass Vaccination funding is only available to cover the costs for COVID vaccine administration and cannot be used for co-administration costs of other vaccines. To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Unique Entity Identifier (UEI) generated by SAM.gov..

**Exhibit A**  
**Statement of Work**  
**Contract Term: 2022-2024**

**DOH Program Name or Title:** Sexual & Reproductive Health Program -  
Effective January 1, 2022

**Local Health Jurisdiction Name:** Pacific County Public Health & Human  
Services Department  
**Contract Number:** CLH31022

**SOW Type:** Revision      **Revision # (for this SOW)** 4

**Period of Performance:** January 1, 2022 through December 31, 2024

<b>Funding Source</b> <input checked="" type="checkbox"/> Federal Subrecipient <input checked="" type="checkbox"/> State <input type="checkbox"/> Other	<b>Federal Compliance</b> (check if applicable) <input checked="" type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development	<b>Type of Payment</b> <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
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**Statement of Work Purpose:** The purpose of this statement of work (SOW) is to provide sexual and reproductive health services (SRH) to Washington State residents. These services will comply with all state, federal, and DOH SRHP Manual requirements. It highlights specific requirements, but all must be complied with. Budgets are based on an approved allocation formula with funds available.

This Statement of Work spans Year 1 and Year 2 of the contract, which runs January 1, 2022 – March 31, 2024

For state funding, due dates after June 30, 2023 are for reporting only. LHJs may not bill under this contract for work done after June 30, 2023.

**Revision Purpose:** The purpose of this revision is to extend the funding period for SFY23 Sexual & Rep Hlth Cost Share from 12/31/22 to 06/30/23 and add \$12,755, extend the period of performance from March 31, 2023 through December 31, 2024, and make minor edits to task deliverables and due dates.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date	LHJ Funding Period End Date	Current Allocation	Allocation Change Increase (+)	Total Allocation
SFY22 Sexual & Rep Hlth Cost Share	78430120	N/A	334.04.91	01/01/22	06/30/22	14,405	0	14,405
FFY22 Title X Dire Needs	78430222	93.217	333.93.21	01/14/22	03/31/22	1,319	0	1,319
FFY22 Title X Family Planning	78430225	93.217	333.93.21	04/01/22	03/31/23	11,568	0	11,568
SFY23 Sexual & Rep Hlth Cost Share	78430130	N/A	334.04.91	07/01/22	06/30/23	12,714	12,755	25,469
						0	0	0
						0	0	0
<b>TOTALS</b>						<b>40,006</b>	<b>12,755</b>	<b>52,761</b>

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.	<b>Sexual and Reproductive Health Program (SRHP) &amp; Title X (TX) Services—excluding abortion and other surgical procedures related to SRHP.</b> A. Comply with Washington State 2022 SRHP Manual, federal Title X requirements and all state and federal laws. Also see Program	<ul style="list-style-type: none"> <li>A19 invoice vouchers submitted in a timely manner accompanied by an R&amp;E workbook showing revenue and expenses for the month billed and any other required back up documentation per DOH policy.</li> </ul>	No more than monthly and no less than quarterly.	Billing must be based on a current cost methodology approved by DOH (see Reporting Requirements table).

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<p>Manual, Handbook, Policy References under 3. Reporting Requirements below.</p> <p>B. Complete required Agency Information Dashboard that includes Title X Assurance of Compliance</p> <ol style="list-style-type: none"> <li>1. Compile all National Provider Identifier (NPI) billing numbers for SRHP services and submit to DOH. DOH will compile and send to Health Care Authority (HCA) in order for LHJ to qualify for the Medicaid Enhanced rate</li> </ol> <p>C. Provide medical services, community education and outreach, and staff training, consistent with state requirements:</p> <ol style="list-style-type: none"> <li>1. LHJ is responsible for making sure all staff have the knowledge to carry out the requirements of the SOW.</li> <li>2. Medical, laboratory, and other services related to abortion are not covered by this task.</li> <li>3. Community education services must be based on the needs of the community. LHJ must have an Information &amp; Education (I&amp;E) committee with no fewer than five (5) members and up to as many members as the LHJ determines; be broadly representative of the population or community for which materials are intended; review all educational materials for clients; meet at least annually and establish a written record of its determination. (42 CFR 59 [59.6])</li> <li>4. Outreach is to ensure all populations in your community understands the services available. Focus your outreach efforts on increasing equity.</li> </ol> <p>Washington State Sexual and Reproductive Health Network priority populations are:</p>	<ul style="list-style-type: none"> <li>• All reports described in Reporting Requirements table below.</li> <li>• Other data and documentation in format requested by DOH. (Includes copies of program and financial audits and reviews including summaries conducted by other entities.)</li> <li>• To facilitate DOH/TX desk reviews—requested documentation available to DOH in requested format.</li> <li>• To facilitate DOH/TX site-visits—appropriate staff and documentation readily available prior to and during review.</li> </ul> <p>DOH performs site visits. Follow-up site visits are performed until identified issues are resolved.</p>	<p>As described in Reporting Requirements table below.</p> <p>As requested by DOH</p> <p>As requested by DOH</p>	<p>DOH reserves the right to withhold payment until:</p> <ul style="list-style-type: none"> <li>• Compliance issues related to this or a previous SOW are resolved in a way accepted by DOH</li> <li>• Current data is submitted to, and accepted by, Ahlers.</li> <li>• A19 back up documentation required by DOH has been submitted and approved.</li> <li>• Other deliverables have been met.</li> </ul> <p>Payment is limited to the maximum funds available for funding source.</p> <p>DOH will reimburse for:</p> <ul style="list-style-type: none"> <li>• Actual allowable costs according to your approved cost methodology (see Reporting Requirements table).</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>• The amount remaining in the SOW divided by the number of months remaining in the funding source, plus one, whichever is less.</li> </ul>



Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	<ul style="list-style-type: none"> <li>• Teens</li> <li>• People who are uninsured or underinsured, and/or low-income (at or below 250% of the federal poverty line)</li> <li>• Rural communities</li> <li>• Hispanic</li> <li>• Black, Indigenous, People of Color</li> </ul> <p>Extra efforts should be made to provide information and services to people who intersect with multiple priority population categories.</p> <p>Provide all services in accordance with:</p> <ul style="list-style-type: none"> <li>• DOH SRHP &amp; Title X Manual</li> <li>• Other state and federal requirements</li> <li>• LHJ's Current Scope Report (defined under 3. Reporting Requirements below)</li> </ul> <p>D. Collect, maintain, and provide data about each family planning clinic visit as defined in the SRH CVR Manual.</p> <ol style="list-style-type: none"> <li>1. Maintain a computer system that includes normal safety precautions against loss of information.</li> <li>2. Ensure data entry personnel protect confidentiality of CVR data.</li> <li>3. Have ability to retrieve all information for auditing and monitoring by DOH or its designee.</li> </ol> <p>E. Notify DOH contract manager of all:</p> <ul style="list-style-type: none"> <li>• Key staff and organizational changes.</li> <li>• Proposed clinic site additions. New clinic sites must be approved by DOH before offering services supported by SOW funding.</li> <li>• Expected clinic site closures. Note: DOH may, at its sole discretion, recalculate LHJ's funding allocation if it closes a clinic site.</li> <li>• Any other change that might affect LHJ's ability to provide the sexual and</li> </ul>	<p>CVR data submitted to DOH data contractor (Ahlers &amp; Associates) electronically in a format compatible with Ahlers software.</p> <ul style="list-style-type: none"> <li>• Data for each month</li> <li>• Corrected CVR data</li> </ul> <p>Email briefly describing change.</p>	<p>The last day of the next month. Within thirty (30) days of receiving error/rejection report or request from DOH Sexual and Reproductive Health data manager.</p> <p>As needed to keep information current.</p>	<p>Payment will be calculated by R&amp;E provided by DOH (see Reporting Requirements table).</p> <p>All services through <del>03-31-23</del> <del>06-30-23</del> must be billed by <del>04-30-23</del> <del>07-30-23</del></p>

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	reproductive services described in this SOW.			
2.	<p><b>Abortion and other surgical procedures related to SRHP</b></p> <p>A. LHJ may choose to use up to 3% of its total SOW state funds for medical and surgical abortions and other SRHP related surgical procedures.</p> <p>B. LHJ must notify the DOH contract manager prior to providing services with SOW state funds. DOH will move the appropriate amount to the appropriate funding source. This may or may not require an amendment.</p> <p>C. Comply with Washington State 2022 SRHP requirements and all state laws. Also see Program Manual, Handbook, Policy References section below.</p> <p>D. Eligible clients are those with incomes at or below 250% FPL.</p> <p>If LHJ bills for services provided by someone outside their organization the outside provider must agree to accept DOH payment as payment in full. LHJ is responsible for ensuring that the outside provider does not seek additional payment from the client or any other person or organization. (Also see Payment column.)</p>	<p>Surgical A19 accompanied by Surgical Services Summary and Health Insurance Claim Forms form for each visit billed.</p> <p>DOH will provide Surgical Services Summary forms and surgical A19s as part of R&amp;E workbook for all LHJs who receive surgical funds.</p>	<p>No more than six (6) months after date service was provided.</p>	<p>DOH will only reimburse LHJ for these services if this SOW includes state surgical funds outside of the Title X Project.</p> <p>DOH will pay for services at Health Care Authority (HCA) Medicaid reimbursement amounts.</p> <ul style="list-style-type: none"> <li>This will be considered payment in full.</li> </ul> <p>LHJ will not seek additional payment from the client or any other person or organization.</p>
<b>3. Reporting Requirements</b>				
	<p><b>1. Agency Information Dashboard</b></p> <p>Information required at the beginning of this SOW period. This information ensures that DOH has accurate information about LHJ's organization and the services it provides.</p> <p>In addition, elements of this report allow DOH to ensure that SRHP &amp; Title X requirements regarding client fees, required services, requirements are met. It also provides other information to assist DOH to manage this SOW</p>	<p>This information must be reported using the template or format provided by DOH. All signatures and forms must be completed by <b>10-31-22 04-30-23</b> It will include:</p> <p>Information about your agency contacts and your organization's staffing</p> <p>A. Head of Organization B. Head of Finance C. Medical Director D. The following (one person might fill more than one role) a. Contract Coordinator b. Clinical representative</p>	<p><b>10-31-22-04-30-23</b></p> <p>AND</p> <p>As needed <i>or requested</i> to maintain accuracy of information.</p>	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	and the Sexual & Reproductive Health Network as a whole.	<p>c. Billing contact</p> <p>d. Outreach and education contact</p> <p>e. Contact for CVR data</p> <p>f. Contact for EHR information</p> <p>E. <i>NPI numbers used to bill Medicaid</i></p> <p>Information regarding sexual and reproductive health related services offered at each clinic site:</p> <p>A. Cost analysis: How LHJ determines what it costs to provide services. LHJ uses this to help construct its fee schedule. A cost analysis must be performed by LHJ no more than three years prior to the start date of this SOW.</p> <p>B. Sliding fee schedule that includes all services required in the SRH Manual. Additional Task 1 SRH-related services may also be included on LHJ's sliding fee schedule.</p> <p>a. Sliding fee schedule must be based on cost analysis described above.</p> <p>b. LHJ may use the last fee schedule approved prior to this SOW as long it was approved later than 04-01-242. LHJ must email the DOH contract manager letting them know it is using a prior approved fee schedule.</p> <p>c. LHJ must not implement a revised fee schedule until it has been approved in writing by DOH.</p> <p>d. Income conversion tables must be updated annually and approved by DOH</p> <p>Information related to current Community Outreach Plan: LHJ's community outreach plan follows a 5-year cycle. In the first year LHJ must assess, document and disseminate community health needs assessment, this process must include the following steps:</p> <p>A. Define the populations LHJ serves and identify opportunities to expand reach within those populations and to unreached populations in each community it serves.</p> <p>B. Identify organizations and people representing the broad interests of the community and identify opportunities for partnership and collaboration.</p> <p>C. Gather available data and current assessments</p>	<p>Submit 2022 sliding fee scale to DOH by 06-30-22 2023 income conversion chart by 03-15-23</p>	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		<p>(secondary data)</p> <p>D. Seek community perspectives by gathering input from the various populations in LHJ's community (collect primary data)</p> <p>E. Aggregate secondary and primary data and analyze aggregated data</p> <p>F. Prioritize health issues, define areas of unmet need, and incorporate both in plans for outreach and education materials and activities</p> <p>G. Document and disseminate the community health needs assessment to LHJ's SRH consultant and appropriate stakeholders</p> <p>Information related to billing and client fees</p> <p>Cost methodology: How LHJ determines appropriate expenses for the purpose of billing DOH.</p> <p>If LHJ cost methodology was approved by DOH after 04-01-2022, LHJ does not have to resubmit unless changes were made. LHJ does need to email DOH contract manager informing them that no changes were made.</p>		
2.	<p><b>Family Planning Annual Report (FPAR)</b></p> <p>Information DOH is requesting to develop trend data. All information is for calendar year 2022 (January through December 2022). The subsequent agreements sent to the agency will request that these data be collected and reported on within the statement of work period of performance.</p>	<p><b>Organization-level data on clinical services emailed to DOH SRH data manager</b></p> <p>Number of:</p> <p>A. Pap tests with an ASC or higher result</p> <p>B. Pap tests with an HSIL or higher result</p> <p>C. HIV Positive confidential tests</p> <p>D. HIV Anonymous tests</p> <p>E. FTE required to provide sexual and reproductive health services:</p> <ul style="list-style-type: none"> <li>• Physicians</li> <li>• Physician assistants + nurse practitioners + certified nurse midwives</li> <li>• Registered nurses with expanded scope of practice who are trained and permitted by state specific regulations to perform all aspects of the physical assessment.</li> </ul> <p>Financial data emailed to DOH Contract Manager R&amp;E showing Other Revenue through 6-30-22 12-31-23 as described in item 5, below.</p>	<p>Data to be collected annually through the end of the contract period (03-31-23).</p>	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		Subsequent agreements will request that data be collected and reported on during the appropriate contract period of performance. (FPAR due 01-31-23 01-31 annually through 2027)		
3.	Clinic Visit Reports (CVRs)	<p>Clinic visit records must include all elements specified in the Clinic Visit Record (CVR) Manual available at: <a href="https://www.doh.wa.gov/Portals/1/Documents/Pubs/930-139-CVRManual.pdf">https://www.doh.wa.gov/Portals/1/Documents/Pubs/930-139-CVRManual.pdf</a>.</p> <p>CVR data must be submitted to DOH data contractor (Ahlers &amp; Associates) electronically in a format compatible with Ahlers software.</p> <ul style="list-style-type: none"> <li>- Each month's CVR data</li> <li>- Corrected CVR data</li> </ul>	The last day of the next month Within thirty (30) days of receiving error or rejection report or request from DOH SRH data manager.	
4.	Revenue and Expense Reports (R&E)	<p>Completed R&amp;E for time period that shows all revenue (including program income) that support Task 1 SRH Services and all expenses related to providing those services. R&amp;E workbook will be provided by DOH.</p> <ul style="list-style-type: none"> <li>A. Expenses must match General Ledger.</li> <li>B. Other revenue/program income must reflect revenue actually received in the reporting month.</li> </ul> <p>All entries on "Other" rows must be accompanied by a description of the revenue source or expense, including any calculations uses.</p>	<p>Submitted with each invoice (A19). No more than monthly and no less than quarterly.</p> <p>R&amp;E showing all sources of revenue that support services for: January 2023-June 2023 due within 30 days after 03-31-23 06-30-23</p>	

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**Federal Funding Accountability and Transparency Act (FFATA)**

This statement of work is supported by federal funds that require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how the federal funds are spent.

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Unique Entity Identifier (UEI) generated by SAM.gov.

Information about the LHJ and this statement of work will be made available on [USASpending.gov](https://USASpending.gov) by DOH as required by P.L. 109-282.

**Program Specific Requirements**

**Program Manual, Handbook, Policy References:**

LHJ must comply with all state and DOH SRH requirements, policies, and regulations and with their DOH approved Current Scope Report.

Exhibit A, Statement of Work

Reference documents include:

- DOH SRHP Manual (DOH publication 930-122, available at <https://www.doh.wa.gov/portals/1/Documents/Pubs/930-122-FPRHManualComplete.pdf>). Some provisions of this manual are highlighted in this SOW, but all provisions of the manual must be complied with.
- Clinic Visit Record Manual (<https://www.doh.wa.gov/Portals/1/Documents/Pubs/930-139-CVRManual.pdf>)
- LHJ's approved Current Scope Report

**Billing Requirements:**

See Payment column of Tasks and Deliverables table and R&E report description in Reporting Requirements table

**Special Instructions:**

Accessibility of Services

- Clients must not be denied services or subjected to variation in quality of services because of inability to pay.
- LHJ must make sure their communities are informed of the services available.
- LHJ must make sure that all services provided are accessible to target populations.
  - Facilities must be geographically accessible to the populations served.
  - As much as possible, services will be available at times convenient to those seeking services.
  - Clinics must comply with the Americans with Disabilities Act.
  - Facilities must meet applicable standards established by the Federal, State, and local governments, including local fire, building, and licensing codes.
  - Clinic settings must ensure respect for the privacy and dignity of the individual.
- Clients must be accepted on referral from any source.
- Services must be provided solely on a voluntary basis. Acceptance of SRH services must not be a prerequisite to eligibility for, or receipt of, services in any non-SRH programs of the LHJ.

Availability of Emergency Services

The LHJ must have written plans and procedures for the management of on-site medical emergencies, including emergencies that require transport and after-hours management of contraceptive emergencies. (See DOH SRH Manual)

**Exhibit A**  
**Statement of Work**  
**Contract Term: 2022-2024**

**DOH Program Name or Title:** WIC Nutrition Program - Effective January 1, 2022

**Local Health Jurisdiction Name:** Pacific County Public Health & Human Services Department

**Contract Number:** CLH31022

**SOW Type:** Revision      **Revision # (for this SOW)** 5

**Period of Performance:** January 1, 2022 through December 31, 2024

<b>Funding Source</b> <input checked="" type="checkbox"/> Federal Subrecipient <input type="checkbox"/> State <input type="checkbox"/> Other	<b>Federal Compliance</b> (check if applicable) <input checked="" type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development	<b>Type of Payment</b> <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price
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**Statement of Work Purpose:** The purpose is to provide Women, Infants, and Children (WIC) Nutrition Program services by following WIC federal regulations, WIC state office policies and procedures, WIC directives, and other rules. Refer to the Program Specific Requirements section of this document.

**Revision Purpose:** To add FFY23 and FFY24 USDA WIC Client Services Contracts funds, FFY23 USDA WIC Program Management CSS funds and a special requirement, and FFY23 USDA BFPC Program Management funds.

DOH Chart of Accounts Master Index Title	Master Index Code	Assistance Listing Number	BARS Revenue Code	LHJ Funding Period Start Date	End Date	Current Allocation	Allocation Change Increase (+)	Total Allocation
FFY22 USDA WIC CLIENT SVS CONTRACTS	76101234	10.557	333.10.55	01/01/22	09/30/22	61,475	0	61,475
FFY23 USDA WIC CLIENT SVS CONTRACTS	76101244	10.557	333.10.55	10/01/22	09/30/23	20,700	63,900	84,600
FFY22 USDA BFPC PROG MGMT	76214231	10.557	333.10.55	01/01/22	09/30/22	10,955	0	10,955
FFY22 USDA FMNP PROG MGMT	76540237	10.572	333.10.57	05/01/22	09/30/22	331	0	331
FFY22 USDA WIC NUTRITION ED	76101236	10.557	333.10.55	01/01/22	09/30/22	2,500	0	2,500
FFY23 USDA BFPC PROG MGMT	76214241	10.557	333.10.55	10/01/22	09/30/23	3,652	10,955	14,607
FFY23 USDA WIC PROG MGMT CSS	76101242	10.557	333.10.55	01/01/23	09/30/23	0	2,400	2,400
FFY24 USDA WIC CLIENT SVS CONTRACTS	TBD	10.557	333.10.55	10/01/23	12/31/23	0	21,300	21,300
<b>TOTALS</b>						<b>99,613</b>	<b>98,555</b>	<b>198,168</b>

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
<b>1</b>	<b>WIC Nutrition Program</b>			See "Billing Requirements" below.
1.1	Maintain authorized participating caseload at 100% based on quarterly average as determined from monthly caseload management reports generated at state WIC office. The Department of Health (Department) State WIC Nutrition Program has the option of reducing authorized participating caseload and corresponding funding when:	Outcomes based on monthly participation data from state WIC caseload management reports.	Authorized participating caseload for January 2022 through December 2024 = <u>215</u>	

Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	1. Unanticipated funding situations occur. 2. Reallocations are necessary to redistribute caseload statewide. 3. Caseload declines.		Revised authorized participating caseload for October 2022 through December 2024 = 240	
1.2	Submit the annual Nutrition Services Plan for each year of the contract.	Nutrition Services Plan	First year due 9/30/22 Second year due 9/30/23	Payment withheld if not received by due date.
1.3	Submit the annual Nutrition Services Expenditure Report for each year of the contract.	Nutrition Services Expenditure Report	11/30/22 11/30/23	Payment withheld if not received by due date.
1.4	Tell participants about other health services in the agency. If needed, develop written agreements with other health care agencies and refer participants to these services.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.5	Provide nutrition education services to participants and caregivers in accordance with federal and state requirements.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.6	Issue WIC benefits while assuring adequate WIC card security and reconciliation.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.7	Collect data, maintain records, and submit reports to effectively enforce the non-discrimination laws (Refer to Civil Rights Assurances below).	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
1.8a	Submit entire WIC and Breastfeeding Peer Counseling Budget Workbook for each year of the contract	Budget Workbook	First year due 9/30/22 Second year due 9/30/23	
1.8b	Submit Rev-Exp Report spreadsheet from the WIC Budget Workbook monthly with A-19	Revenue and Expense Report and A-19	First year due monthly through December 31, 2022 Second year due monthly through December 31, 2023	
2	<b>Breastfeeding Promotion</b>			See "Billing Requirements" below.
2.1	Provide breastfeeding promotion activities in accordance with federal and state requirements.	Status report of chosen activities in Nutrition Services Plan.  Documentation must be available for review by WIC monitor staff.	First year due 11/30/22 Second year due 11/30/23  Biennial WIC Monitor	
2.2	Work with community partners to improve practices that affect breastfeeding. Choose one or more of the following projects: <ul style="list-style-type: none"> <li>Provide staff, health care providers and community partners virtual breastfeeding training resources.</li> <li>Work with employers who likely employ low-income people to create worksite environments that support breastfeeding.</li> <li>Work with birthing hospitals to improve maternity care practices that affect WIC participant breastfeeding rates.</li> <li>Provide participants access to lactation consultants.</li> </ul>	Status report of chosen activities in Nutrition Services Plan.  Documentation must be available for review by WIC monitor staff.	First year due 8/30/22 Second year due 8/30/23  Biennial WIC Monitor	



Task #	Activity	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Other projects will need pre-approval from the State WIC Office			
<b>3</b>	<b>Breastfeeding Peer Counseling Program (BFPC)</b>			See "Billing Requirements" below.
3.1	Provide Breastfeeding Peer Counseling Program activities in accordance with federal and state requirements. The WIC Breastfeeding Peer Counseling Program is meant to enhance, not replace, WIC Breastfeeding promotion and support activities.	Breastfeeding Peer Counseling Annual Report and expenditures from the previous federal fiscal year.  Documentation must be available for review by WIC monitor staff.	First year due 12/31/22 Second year due 12/31/23  Biennial WIC Monitor	
3.2	Track Breastfeeding Peer Counseling Program expenditures and bill separately from the WIC grant.	Documentation must be available for review by WIC monitor staff.	Biennial WIC Monitor	
<b>4</b>	<b>Farmers Market Nutrition Program (FMNP)</b>			See "Billing Requirements" below.
4.1	Distribute all Farmers Market Nutrition Program checks to eligible WIC participants between June and September 30 of current year.	Send completed readable copy of FMNP check registers to State WIC office on a weekly basis following FMNP procedures.  Documentation must be available for review by WIC monitor staff.	Weekly June-Sept. 2022 and June-Sept. 2023  All sent by Oct. 1, 2022 and by Oct. 1, 2023  Biennial WIC Monitor	

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**Federal Funding Accountability and Transparency Act (FFATA) (Applies to federal grant awards.)**

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Information about the LHJ and this statement of work will be made available on [USASpending.gov](#) by DOH as required by P.L. 109-282.

**Program Specific Requirements**

**Program Manual, Handbook, Policy References:**

The LHJ shall be responsible for providing services according to rules, regulations and other information contained in the following:

- WIC Federal Regulations, USDA, and FNS 7CFR Part 246.
- Washington State WIC Nutrition Program Policy and Procedure Manual
- Office of Management and Budget, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, 2 CFR 200
- Farmers Market Nutrition Program Federal Regulations, USDA, FNS 7CFR Part 248

Exhibit A, Statement of Work

- Other directives issued during the term of the contract

#### **Staffing Requirements:**

The LHJ shall:

- Use Competent Professional Authority staff, as defined by WIC policy, to determine participant eligibility, prescribe an appropriate food package and offer nutrition education based on the participants' needs.
- Use a Registered Dietitian (RD) or other qualified nutritionist to provide nutrition services to high risk participants, to include development of a high-risk care plan. The RD is also responsible for quality assurance of WIC nutrition services. See WIC Policy for qualifications for a Registered Dietitian and other qualified nutritionist.
- Assign a qualified person to be the Breastfeeding Coordinator to organize and direct local agency efforts to meet federal and state policies regarding breastfeeding promotion and support. The Breastfeeding Coordinator must be an International Board-Certified Lactation Consultant or attend an intensive lactation management course, or other state approved training.

#### **Restrictions on Funds:**

The LHJ shall follow the instructions found in the Policy and Procedure Manual under WIC Allowable Costs and 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

#### **Special References:**

What is the WIC program?

1. The WIC program in the state of Washington is administered by the Department of Health.
2. The WIC program is a federally funded program established in 1972 by an amendment to the Child Nutrition Act of 1966. The purpose of the program is to provide nutrition and health assessment; nutrition education; nutritious food; breastfeeding counseling; and referral services to pregnant, breastfeeding, and postpartum women, infants, and young children in specific risk categories.
3. Federal regulations governing the WIC program (7 CFR Part 246) require implementation of standards and procedures to guide the state's administration of the WIC program. These regulations define the rights, responsibilities, and legal procedures of WIC employees, participants, persons acting on behalf of a participant, and retailers. They are designed to promote:
  - a. High quality nutrition services;
  - b. Consistent application of policies and procedures for eligibility determination;
  - c. Consistent application of policies and procedures for food benefit issuance and delivery; and
  - d. WIC program compliance.
4. The WIC program implements policies and procedures stated in program manuals, handbooks, contracts, forms, and other program documents approved by the USDA Food and Nutrition Service.
5. The WIC program may impose sanctions against WIC participants for not following WIC program rules stated on the WIC rights and responsibilities.
6. The WIC program may impose monetary penalties against persons who misuse WIC benefits or WIC food but who are not WIC participants.

#### **Monitoring Visits:**

Program and fiscal monitoring are done on a biennial (every two years) basis and are conducted onsite.

The LHJ must maintain on file and have available for review, audit and evaluation:

- All criteria used for certification, including information on income, nutrition risk eligibility and referrals
- Program requirements
- Nutrition education
- All financial records

#### **Assurances/Certifications:**

1. Computer Equipment Loaned by the Department of Health WIC Nutrition Program

In order to perform WIC program activities, the Department requires computer equipment, such as computers, signature pads, document scanners, card readers and printers to be in local WIC clinics or to be transported to mobile clinics. This equipment ("Loaned Equipment") is owned by the Department and loaned to the local agency (Contractor). The Loaned Equipment is supported by the Department. This equipment shall be used for WIC business only or according to WIC Policy and Procedures.

An inventory of Loaned Equipment is kept by the Department. Each time Loaned Equipment is changed, the parties shall complete the Equipment Transfer Form and the Department updates the inventory. A copy of the Transfer Form will be provided to the contractor. Copies of the updated inventory list may be requested at any time.

The LHJ agrees to:

- a. Defend, protect and hold harmless the Department or any of its employees from any claims, suits or actions arising from the use of this Loaned Equipment.
  - b. Assume responsibility for any loss or damage from abnormal wear or use, or from inappropriate storage or transportation. The Department may enforce this by:
    - 1) Requiring reimbursement from the LHJ of the value of the Loaned Equipment at the time of the loss or damage.
    - 2) Requiring the LHJ to replace the Loaned Equipment with equipment of the same type, manufacturer, and capabilities (as pre-approved by the Department), or
    - 3) Assertion of a lien against the Contractor's property.
  - c. Notify the Department immediately of any damage to Loaned Equipment.
  - d. Notify the Department prior to moving or replacing any Loaned Equipment.
- The Department recommends Contractors carry insurance against possible loss or theft.

## 2. Civil Rights Assurance

- a. The LHJ shall perform all services and duties necessary to comply with federal law in accordance with the following Civil Rights Assurance.
- b. "The Program applicant hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.); all provisions required by the implementing regulations of the Department of Agriculture; Department of Justice Enforcement Guidelines, 28 CFR 50.3 and 42; and FNS directives and guidelines, to the effect that, no person shall, on the ground of race, color, national origin, sex, age or handicap, be excluded from participation in, be denied benefits of, or otherwise be subject to discrimination under any program or activity for which the Program applicant receives Federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.
- c. "By accepting this assurance, the Program applicant agrees to compile data, maintain records and submit reports as required, to permit effective enforcement of the nondiscrimination laws and permit authorized USDA personnel during normal working hours to review such records, books and accounts as needed to ascertain compliance with the nondiscrimination laws. If there are any violations of this assurance, the Department of Agriculture, Food and Nutrition Service, shall have the right to seek judicial enforcement of this assurance. This assurance is binding on the Program applicant, its successors, transferees, and assignees, as long as it receives assistance or retains possession of any assistance from the Department. The person or persons whose signatures appear on the contract are authorized to sign this assurance on behalf of the Program applicant."

## 3. 2CFR 200

The LHJ shall comply with all the fiscal and operations requirements prescribed by the state agency as directed by Federal WIC Regulations (7CFR part 246.6), 2CFR part 200, the debarment and suspension requirements of 2CFR part 200.213, if applicable, the lobbying restrictions of 2CFR part 200.245, and FNS guidelines and instructions and shall provide on a timely basis to the state agency all required information regarding fiscal and program information.

## Billing Requirements:

### 1. Definitions

**Contract Period:** January 1, 2022 - December 31, 2024

**Contract Budget Period:** The time period for which the funding is budgeted.

- There are four federal budget periods
  - January 1, 2022 through September 30, 2022;
  - October 1, 2022 through September 30, 2023;
  - October 1, 2023 through September 30, 2024;
  - October 1, 2024 through December 31, 2024.

### 2. Billing Information:

Exhibit A, Statement of Work

- a. Billings are submitted on an A-19-1A invoice. These invoices are provided by the Department in the WIC Budget Workbook and include accounting codes for different budget categories.
- b. A-19s are submitted monthly and must be received by the Department within 60 days following the close of each calendar month. Additional A-19s may be submitted at any time, but must be received within 90 days of the close of the federal budget period.
- c. Funds are allocated by budget categories and by federal budget periods (refer to the budget spreadsheet).
- d. Funds are encumbered or spent only during the budget period; no carry forward from previous time periods or borrowing from future time periods is allowed.
- e. Payments are limited to the amounts allocated for the budget period for each budget category.
- f. Billings are based on actual costs for completed activities. Advance payments are not allowed. Back up documentation must be retained by the LHJ and available for inspection by the Department or other appropriate authorities.
- g. Payments will be made only for WIC approved expenditures. Refer to the Washington State WIC Nutrition Program Policy and Procedure Manual Volume 2, Chapter 4 – Allowable Costs and 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.
- h. If billing for indirect costs, a Cost Allocation Plan or Federal Indirect Cost Agreement must be submitted prior to payment.

#### Special Instructions:

The LHJ shall:

1. Maintain complete, accurate, and current accounting of all local, state, and federal program funds received and expended.
2. Provide, as necessary, a single audit in accordance with the provisions of 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. This circular requires all recipients and sub-recipients of federal funds to have a single audit performed should they spend \$750,000 or more of federal grants or awards from all sources. Contractors spending less than \$750,000 in federal grants or awards may also be subject to audit.
3. Use Breastfeeding Peer Counseling (BFPC) Program funds only to support the peer counseling program. Once the program is established and peer counselors are trained, the majority of the salary costs must be paid to peer counselors to provide direct services to WIC participants. For a list of allowable costs see Volume 2, Chapter 4 – Allowable Costs. The priority use of BFPC funds is to hire and train peer counselors to provide breastfeeding peer counseling services to WIC participants.

SPECIAL REQUIREMENTS			
Contract Funding Period	Time Period special requirement funds are available	Amount	Special Requirement Description
January 2022 to September 2024	January 2022 to September 2022	\$3,500	Added in the USDA WIC Client Services Contracts category to cover training and travel expenses for all local WIC staff to participate in WIC-related trainings.
January 2022 - September 2022	January 2022 - September 2022	\$2,500	Added in the USDA WIC Nutrition Education category to fund staff time, conference registration and travel expenses for one WIC-funded staff to attend the 2022 NWA Biennial Nutrition Education and Breastfeeding Conference in Orlando, Florida on September 6 to September 9, 2022.
January 2023 - September 2023	January 2023 - September 2023	\$2,400	<i>This funding is for all WIC staff to participate in WIC-related training. Added in the USDA WIC Client Services Contracts category to cover training registrations, travel expenses, staff time to participate in training (salary/benefits or contractor), and other approved WIC training expenses.</i>

#### Other:

Any program requirements that are not followed may be subject to corrective action and may result in monetary fines or repayment of funds.