PACIFIC COUNTY HEALTH & HUMAN SERVICES DEPARTMENT
2015 – 2017 CONSOLIDATED CONTRACT

CONTRACT NUMBER: C17121 **AMENDMENT NUMBER: 1**

PURPOSE OF CHANGE: To amend this contract between the DEPARTMENT OF HEALTH hereinafter referred to as "DOH", and PACIFIC COUNTY HEALTH & HUMAN SERVICES DEPARTMENT 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, attached and incorporated by this reference, are amended as follows:

   ☒ Adds Statements of Work for the following programs:

   - Supplemental Nutrition Assistance Program-Education - Effective January 1, 2015

   ☒ Amends Statements of Work for the following programs:

   - Family Planning - Effective January 1, 2015

   ☐ Deletes Statements of Work for the following programs:

2. Exhibit B-1 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B Allocations as follows:

   ☒ Increase of **$94,080** for a revised maximum consideration of **$424,318**.

   ☐ Decrease of _____ for a revised maximum consideration of _____.

   ☐ No change in the maximum consideration of _____.
   Exhibit B Allocations are attached only for informational purposes.

3. Exhibit C-1 Schedule of Federal Awards, attached and incorporated by this reference, amends and replaces Exhibit C.

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 HEALTH & HUMAN SERVICES DEPARTMENT

_____
Date

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

_____
Date

APPROVED AS TO FORM ONLY
Assistant Attorney General

2015-2017 CONSOLIDATED CONTRACT
EXHIBIT A
STATEMENTS OF WORK
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Statement of Work
Contract Term: 2015-2017

DOH Program Name or Title: Family Planning - Effective January 1, 2015

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

Contract Number: C17121

SOW Type: Revision **Revision # (for this SOW)** 1

Period of Performance: January 1, 2015 through January 15, 2016

Funding Source	Federal Compliance (check if applicable)	Type of Payment
☒ Federal Subrecipient ☒ State ☐ Other	☒ FFATA (Transparency Act) ☐ Research & Development	☒ Reimbursement ☐ Fixed Price

Statement of Work Purpose: The purpose of this statement of work is to provide family planning services to Washington State residents. These services will comply with all federal, state requirements and with the guidelines in the DOH Family Planning Manual. This statement of work highlights specific requirements and guidelines, but all must be complied with.

Due dates in 2016 are for reporting only. LHJ may not bill under this statement of work for work done in 2016

Revision Purpose: The purpose of this revision is to extend the period of performance and add funding to support existing tasks.

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only) Start Date	End Date	Current Consideration	Change Increase (+)	Total Consideration
FY15 Title X State (2015 Cost Share)	N/A	334.04.91	78353151	01/01/15	06/30/15	10,834	669	11,503
TBD [FY16 Title X State (2015 Cost Share)]	N/A	334.04.91	TBD	07/01/15	12/31/15	10,588	0	10,588
YR4 Title X Fed (2012-2016)	93.217	333.93.21	78353250	01/01/15	12/30/15	8,010	0	8,010
TOTALS						**29,432**	**669**	**30,101**

Task Number	Task/Activity/Description	*May Support PHAB Standards/ Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.	**Overarching requirements** A. Comply with federal Title X requirements. B. Keep DOH informed of LHJ staff contact information and notify DOH contract manager of any key staff changes, clinic site additions, or clinic site closures. C. Provide medical services and community education consistent with state and federal Title X requirements: 1. Provide medical, laboratory, and related services specified in the Title X Guidelines, the DOH Family Planning Manual, and state laws. 2. Provide a broad range of acceptable and medically approved family planning methods and services either onsite or by referral.		Signed Title X Assurance of Compliance. Signed Form A: Agency Information (provided by DOH) • Documentation that medical component is conducted as required. • Documentation that Client Referral List is maintained and updated regularly • Other documentation as requested by DOH	01-31-15 01-31-15 and as needed As requested	**DOH reserves the right to withhold payment if compliance issues are not corrected; until acceptable data have been submitted; or until deliverables are met.** Up to the maximum funds available for each funding source in the funding table above, DOH will reimburse for: • Actual allowable costs incurred through direct association or through an approved cost allocation

Task Number	Task/Activity/Description	*May Support PHAB Standards/ Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	3. Make all methods of contraception approved by the Food and Drug Administration available to clients. 4. Provide community education services based on the needs of the community. D. Conduct medical component of contract under written protocols that are signed by the medical director. Medical director must have special training and/or experience in family planning. (DOH Family Planning Manual 6100) E. Maintain a Client Referral List: a list of public and private social and health care providers and agencies to use when providing referrals. This list must be updated regularly (DOH Family Planning Manual 6600) F. Maintain an Information and Education committee (I&E) with membership that is broadly representative of the community. This committee must: 1. Have 5-9 members. 2. Meet at least once a year. 3. Follow the Title X guidelines and regulations. 4. Review and approve informational or educational materials developed by, or made available under, the Title X project, using a process that makes sure that: a. There is community participation in both review and approval b. Materials are suitable for the population or community that they are intended for, factually accurate, and appropriate for the purposes of Title X. The committee may delegate responsibility for the review of factual, technical, and clinical accuracy to appropriate project staff. (Title X 6.8) G. Facilitate DOH site-visits by making sure that appropriate staff and documentation are readily available prior and during review. (DOH performs Administrative and Clinical site visits on a three-year cycle) H. Provide information as requested to DOH family planning staff in a timely manner.		• Requested data in requested format.		rate/method or • The amount remaining in the contract divided by the number of months remaining, plus one, whichever is less. (DOH Family Planning Manual 4600) All services 01-01-15 through 06-30-15 must be billed by 07-15-15. All services 07-01-15 through 12-31-15 must be billed by 01-15-16.

Task Number	Task/Activity/Description	*May Support PHAB Standards/ Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
2.	**Services in the Title X Project** In addition the other requirements of this contract, Title X Project activities must also comply with the Title X Program Guidelines for Project Grants for Family Planning Services. A. Title X Project must be administered by a qualified program director as defined in Title X requirements. (Title X 6.5, 6.8, 6.9). B. Do not provide abortion as a method of family planning within the Title X Project. (42CFR59.5(5)). C. Clinics designation (inside or outside Title X Project) must remain unchanged for the entire contract period.		Completed reimbursement workbook (template provided by DOH) for time period that shows all sources of revenue that support Title X Project activities: • Jan-Mar 2015 • Apr-Jun 2015 • Jul-Sep 2015 • Oct-Dec 2015	 04-15-15 07-15-15 10-15-15 01-15-16	
	D. Inform staff that individuals may be subject to prosecution under federal law if they coerce or endeavor to coerce any person to undergo abortion or sterilization.		Documentation that all staff have been informed about prosecution for coercion.	As requested	
	E. Have written policies about access to timely quality language assistance services for limited English proficient persons. These policies must be consistent with the Office of Civil Rights Policy: Guidance on Prohibitions Against National Origin Discrimination As It Affects Persons with Limited English Proficiency.		Documentation that policies are in place.	As requested	
	F. Collect, maintain, provide client visit and agency level data for the Title X project. 1. Client Visit Record (CVR) data: a. Collect all data items for client visits as specified in CVR Manual provided by DOH; b. Submit CVR data to DOH data contractor (Ahlers & Associates) c. Respond to notification of data errors and omissions from the data contractor or DOH family planning data manager.		CVR data for the previous month submitted to DOH data contractor. Data must be submitted: • Electronically • In format compatible with contractor's software.	The 15th of each month	
			Corrected CVR data submitted to DOH data contractor as specified above.	Within 30 days of receiving error/ rejection report	
	2. Agency level data: Collect the following agency level data items required for the federal family planning annual report. (FPAR)		Email agency level data to DOH family planning data manager for period 01-01-14 to 12-31-14	 01-15-15	

Task Number	Task/Activity/Description	*May Support PHAB Standards/ Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Number of: a. Pap tests with an ASC or higher result; b. Pap tests with an HSIL or higher result; c. HIV Positive confidential tests; d. HIV Anonymous tests; e. FTE Physicians; f. FTE Physician assistants/nurse practitioners/certified nurse midwives; g. FTE registered nurses with an expanded scope of practice who are trained and permitted by Washington regulations to perform all aspects of the user physical measures. 3. Data security: a. Clinics that keep CVR information as computerized data must also keep hard copy CVRs in the client's medical record, or maintain a computer system that includes normal safety precautions against the loss of information; b. Data entry personnel are subject to the rules of confidentiality as specified in this contract and the Title X program guidelines. 4. LHJ must be able to retrieve all information for auditing and monitoring by DOH or its designee.		01-01-15 to 12-31-15	01-15-16	
	G. Annual audit that meets state and federal requirements 1. Audits must be conducted by an outside source 2. Financial and program audits or reviews conducted by other entities must be made available to DOH or its designee.		Copies of program and financial audits and reviews including summaries	As requested	
	H. Equipment (items that cost more than $5,000 per unit): 1. Obtain prior approval from DOH contract manager before purchasing equipment: a. LHJ must submit budget that itemizes planned equipment purchase b. DOH approval of this budget approves the itemized items only.		Budget itemizing equipment	As needed	

Task Number	Task/Activity/Description	*May Support PHAB Standards/ Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	2. Maintain property control system to prevent loss, damage, or theft. 3. Maintain records that show the purchase and disposition of all equipment purchased, in whole or part, with state or federal funds. 4. Perform equipment inventories each year for equipment purchased, in whole or part, with state funds. (DOH Family Planning Manual 4300, 4310, 45CFR74, Subpart C)		Annual equipment inventory showing all equipment: • Costing over $5,000 per unit • Purchased, in whole or in part, with state or federal funds • Purchased from 01-01-14 to 12-31-14 01-01-15 to 12-31-15	 01-31-15 01-31-16	
	I. Submit the Annual Plan by requested due date. Develop plan for next year using forms and instructions provided by DOH. (DOH Family Planning Manual 3310)		Annual Plan for 01-01-16 to 12-31-16	 07-15-15	
3. Services outside Title X project A. Surgical and medical procedures and ambulatory procedures to eligible clients. (DOH Family Planning Manual 3210): 1. Make sure funding is available, from this contract or another funding source, to provide this throughout the contract period. 2. Comply with all federal and state regulations that apply to pregnancy terminations and sterilization procedures. 3. The LHJ may provide these services and procedures through service providers in the same geographical area. The LHJ must: a. Obtain formal subcontracts or provider agreements when feasible. If service providers are unwilling to sign a formal agreement, keep documentation of the refusal on file b. Inform all such providers of applicable billing and reimbursement procedures. c. Be responsible for making sure that the service providers comply with the terms of this contract.		Documentation that access to surgical services and ambulatory procedures is available to eligible clients.	As requested	This statement of work does not provide funding for these services.

Task Number	Task/Activity/Description	*May Support PHAB Standards/ Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	4. DOH will base surgical and medical procedure reimbursement rates on the current HCA Medicaid approved reimbursement amounts. 5. Payment for surgical and medical procedures under this contract constitutes full payment. LHJ will not seek additional payment from the client, physician, hospital or other provider.				

***For Information Only:**
Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf

Program Specific Requirements/Narrative

Special Requirements
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 Data Universal Numbering System (DUNS®) number.

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

Program Manual, Handbook, Policy References
LHJ must comply with all federal Title X, state, and DOH Family Planning requirements, policies, and regulations. If the LHJ changes the scope of project outlined in their current DOH approved Annual Plan they must resubmit those parts of the plan that have changed to their site consultant for approval.

See the DOH Family Planning Manual, Chapter 1, Section 1400 and 1500 for a complete list of federal and state requirements.

Reference documents include:
- DOH Family Planning Manual (DOH publication 930-122). See especially section 1500. Some provisions of this manual are highlighted in this (Program Specific Requirements) section, but all provisions of the manual must be complied with.
- Title X Guidelines
- Client Visit Record Manual
- LHJ's approved Annual Plan (grant application) for this time period (submitted during the previous contract period).

Definitions
- DOH contract manager is the same as DOH program contact. Changes to the DOH contract manager will be emailed to LHJ (no contract amendment will be executed for DOH contract manager changes).

- Title X Project means services that have been designated by contractor as in-project. These must be services that are allowed under federal Title X requirements. This includes all funds used to pay for Title X project tasks and services (not just funds received through this contract): client fees, insurance reimbursements, Take Charge reimbursements, other Medicaid reimbursements, and other income or revenue generated through providing Title X project services. The Title X Project must not include sterilizations, abortions, or any flat rated service (for instance some STD or HIV testing); or income/revenue generated from them.

Special Billing Requirements
LHJ may bill no more than monthly and no less than quarterly.

Accessibility of Services
(DOH Family Planning Manual 5500, Title X Guidelines 6.4)

- Adolescents and low-and marginal-income clients must receive priority in the provision of services.
- LHJ must make sure that the community is informed of the services available through the LHJ.
- 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 be handicapped-accessible in accordance with federal and state laws, policies, and procedures.
  - 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 delivered without discrimination against people who have AIDS, are perceived to have AIDS, are related to or residing with someone with AIDS, have tested positive for the HIV antibody, or are perceived to be at high risk for contracting HIV.
- Services must be provided solely on a voluntary basis. Acceptance of family planning services must not be a prerequisite to eligibility for, or receipt of, services in any non-family planning programs of the LHJ.

Availability of Emergency Services
(DOH Family Planning Manual 6800)

The LHJ must have written plans and procedures for the management of on-site medical emergencies and emergencies requiring ambulance services and transport to a medical facility.

The LHJ must inform clients of after-hours emergency procedures through the interview process, posters, or written instructions.

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Exhibit A
Statement of Work
Contract Term: 2015-2017

DOH Program Name or Title: Supplemental Nutrition Assistance Program-Education - Effective January 1, 2015

Local Health Jurisdiction Name: Pacific County Health & Human Services Department
Contract Number: C17121

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

Period of Performance: January 1, 2015 through October 15, 2015

Funding Source	Federal Compliance (check if applicable)	Type of Payment
☒ Federal Subrecipient ☐ State ☐ Other	☒ FFATA (Transparency Act) ☐ Research & Development	☒ Reimbursement ☐ Fixed Price

Statement of Work Purpose: The purpose of this statement of work is to provide Supplemental Nutrition Assistance Program - Education (SNAP-Ed) to improve the likelihood that persons eligible for SNAP (Food Stamps) will make healthy food choices within a limited budget and choose active lifestyles consistent with the current USDA dietary guidance system

Revision Purpose: N/A

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only) Start Date	End Date	Current Consideration	Change Increase (+)	Total Consideration
FFY15 DSHS SNAP-Ed IAR	10.561	333.10.56	76430950	01/01/15	09/30/15	0	70,058	70,058
FFY14 DSHS SNAP-Ed IAR CARRYFORWARD	10.561	333.10.56	76430941	01/01/15	09/30/15	0	23,353	23,353
TOTALS						**0**	**93,411**	**93,411**

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1.0	For SNAP-Ed, the LHJ will perform work as described in the SNAP-Ed Work Plan approved by Department of Social and Health Services (DSHS) and United States Department of Agriculture (USDA).		1. Target audiences reached. 2. Project activities completed 3. Evaluation measures completed	For the Period: 01/01/15-09/30/15 **Due 09/30/15**	Reimbursement upon receipt and approval of deliverables for the funding period will not exceed **$93,411. Pacific County Health & Human Services Department** will be paid the allowable costs incurred based on Budget. (See Special Billing Requirements below.)

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
					<u>Notification of Budget and Funding Reauthorization</u>** The LHJ is hereby informed that the DOH SNAP-Ed Program IS REAUTHORIZING UNSPENT funds for tasks that WERE NOT able to be completed by December 31, 2014, under this new 2015-2017 consolidated contract to extend from January 1, 2015 through September 30, 2015. (See Special Instructions below.)
1.1	**Submit Quarterly Progress Reports** Report data to be collected: 1. Audience served by race/ethnicity, sex, SNAP eligibility, and age 2. Setting type and project activity details 3. Key nutrition messages delivered 4. Formative, processes and outcome evaluation results to date 5. Achievements, challenges, changes 6. Success stories 7. Other		Using the electronic means and forms provided by DOH to summarize the work aforementioned in the SNAP-Ed work plans for quarter reports.	Quarterly Report due for the period October 1, 2014 –September 30, 2015. 1st quarter due 01/30/15 2nd quarter due 04/30/15 3rd quarter due 07/30/15 4th quarter due 10/15/15	See payment information as referenced in task number 1.0
1.2	**Submit Timely Invoice Vouchers**		Prepare and submit invoice vouchers monthly (*or with pre-approval by DOH contract manager, every two months maximum,) using the A19-1A specific to SNAP-Ed and a detailed ledger.	**Monthly**: due no later than 30 days after the end of the preceding month. (e.g. October A19 invoice submitted no later than November 30 and so on.) **Final invoice is due October 30, 2015.** *If and only if, you have been pre-approved to bill on a 2-month billing cycle, A19 invoices must	See payment information as referenced in task number 1.0 **NOTE: IN FFY15 The SNAP-Ed program will deny payment for any costs not submitted by the due date without prior approval. (See Special Billing Requirements below.)**

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
				be received by DOH no later than dates listed below: Oct & Nov due: 12/31/14 Dec & Jan due: 02/28/15 Feb & Mar due: 04/30/15 Apr & May due: 06/30/15 Jun & Jul due: 08/31/15 Aug & Sept due: 10/30/15	

***For Information Only:**
Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf

Program Specific Requirements/Narrative

Special Requirements
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 Data Universal Numbering System (DUNS®) number.

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

Special Instructions
****Notification of Budget and Funding Reauthorization**
The LHJ was informed in the previous Statement of Work in Contract #C16896 effective October 1, 2014 – December 31, 2014 that the DOH SNAP-Ed program fully planned to reauthorize unspent funds for tasks that were not able to be completed by December 31, 2014 via this new statement of work under the new 2015-2017 consolidated contract to extend from January 1, 2015 through September 30, 2015. Any funds already paid out to LHJ under the previous contract will be deducted and reflected in a revision to this statement of work and included in an upcoming contract amendment.

Program Manual, Handbook, Policy References
Supplemental Nutrition Assistance Program Education Guidance for FFY15
Nutrition Education and Obesity Prevention Grant Program http://snap.nal.usda.gov/snap/Guidance/FinalFY2015SNAP-EdGuidance.pdf

Assurances / Certifications (See page 86 of the FFY15 Guidance – Assurances)
- The local governmental agency, Indian Tribal Organization or non-Governmental Agency is fiscally responsible for nutrition education activities funded with Supplemental Nutrition Assistance Program Education funds and is liable for repayment of unallowable costs.

- Nutrition education activities are conducted for the benefit of Supplemental Nutrition Assistance Program participants, applicants, and those eligible.
- Efforts are made to target SNAP-Ed to the SNAP-Ed target population.
- Activities funded under the Expanded Food and Nutrition Education Program (EFNEP) grant are not allowed to be included in the budget for SNAP-Ed.
- Documentation of payments for approved SNAP-Ed activities must be maintained by the LHJ and be available for review and audit.
- Contracts are procured through procedures governed by State procurement regulations.
- Program activities are conducted in compliance with all applicable Federal laws, rules, regulations including Civil Rights and OMB circulars governing cost issues.
- Program activities do not supplant existing nutrition education programs, and where operating in conjunction with existing programs, enhance and supplement them.
- Program activities are reasonable and necessary to accomplish SNAP-Ed objectives and goals.
- All materials developed or printed with SNAP Education funds include the appropriate USDA non-discrimination statement, credit to SNAP as a funding source, and a brief message about how SNAP can help provide a healthy diet and how to apply for benefits. For more information see *Appendix G: Notes About Education Materials* on pp 109-111 of FFY15 Guidance at http://snap.nal.usda.gov/snap/Guidance/FinalFY2015SNAP-EdGuidance.pdf
- Messages of nutrition education and obesity prevention are consistent with the Dietary Guidelines for Americans and do not disparage any specific food, beverage or commodity.

Audits
The local governmental agency, Indian Tribal Organization or non-Governmental Agency must make State financial and program audits or reviews conducted by other entities available to the DOH, DSHS, USDA, or its designee.

Monitoring Expectations
The local governmental agency, Indian Tribal Organization or non-Governmental Agency's premises and records will be made available upon request to DOH, DSHS, and USDA staff for the purposes of observing nutrition education activities and reviewing for program and fiscal compliance. All non-capital equipment and reusable educational materials should be tracked in an inventory list and available for review upon request.

Indirect Rate
All indirect rates must be submitted and preapproved by the DOH SNAP-Ed program. Per SNAP-Ed FFY15 Guidance pages 103-104, the LHJ is responsible for ensuring that indirect costs included in the LHJ's SNAP-Ed plan are supported by an indirect cost agreement and/or cost allocation plan approved by the appropriate agency. The LHJ cannot bill indirect costs that are determined to be unacceptable and will be disallowed.

Annual Civil Rights Training Requirement (see FNS Instruction Number 113-1 Chapter XI) - http://www.fns.usda.gov/sites/default/files/113-1.pdf
"Training is required so that people involved in all levels of administration of programs that receive Federal financial assistance understand civil rights related laws, regulations, procedures, and directives. The local governmental agency, Indian Tribal Organization or non-Governmental Agency must are responsible for training their subrecipients, including 'frontline staff.' 'Frontline staff' who interact with program applicants or participants, and those persons who supervise 'frontline staff' must be provided civil rights training an annual basis." Documentation must be maintained in personnel files confirming the following:

1. Name(s) of staff attending/completing the annual civil rights training,
2. Date of training
3. Brief summary of training sources/materials

Records
(Record Retention and Management-State Agency and All Sub-grantees 7CFR 272.2)
SNAP-Ed regulations require that all records be retained for six years from fiscal closure. This requirement applies to fiscal records, reports and client information. Supporting documentation may be kept at the sub-grantee level, but shall be available for review for six (6) years from the date of quarterly claim submittal. Any costs that cannot be substantiated by source documents will be disallowed as charges to SNAP.

Travel
The LHJ is expected to comply with the Office of Financial Management's Travel Management Requirement and Restrictions as found in policy 10.10.
http://www.ofm.wa.gov/policy/10.htm

Amendments
Agencies must submit a request to DOH to amend a project plan and/or budget for prior approval whenever they wish to change the USDA-approved scope of activities and/or budget. All requests for amendments must be submitted no later April 1, 2015.
Please Note:
1. No changes may be incorporated into the project plan until an amendment request is approved by DOH and/or USDA
2. Any requests submitted after April 1, 2015 will NOT be approved.

Budget Revisions
The local governmental agency, Indian Tribal Organization or non-Governmental Agency, is allowed, in the Federal Fiscal year period, to request an adjustment be made to a funded line item listed in within the approved budget, with pre-approval from the DOH designated SNAP-Ed contract manager. Any anticipated changes to the budget must be pre-approved by DOH.

Special Funding Requirements
Payment for deliverables as specified herein is dependent on receipt of funding from the USDA funding sources. In the event funding is not received, DOH is under no obligation to make payments for the deliverables as specified. If funding is reduced or limited in any way after the effective date of this contract and prior to normal completion DOH may terminate task(s), remove funds, or reallocate funds at DOH's discretion under new funding limitations and conditions. DOH will make payments only upon the receipt of the funding. DOH will notify the LHJ within seven (7) working days upon notice by the funding source of funding availability.

Special Billing Requirements
1. All invoices, billing and reimbursements must be in compliance with all applicable Federal laws, rules, regulations including the FFY15 SNAP-Ed Guidance and OMB circulars governing cost issues.

2. Total costs bill will not exceed the USDA-approved budget amount listed in the text box below.
   a. Bills must be for only SNAP-Ed specific activities, using a DOH A19-1A Invoice voucher
   b. A SNAP-Ed specific A19-1A must be submitted to the agency's designated DOH SNAP-Ed contract manager within thirty (30) days of the last day of the month for which the work is being billed, OR
   c. An agency may request pre-approval to bill every two (2) months instead, in which case, that agency is required to adhere to the billing due dates listed in Task 1.2 (see above)

3. NOTE: IN FFY15 the SNAP-Ed program will deny payment for any costs not submitted by the due date without prior approval. If for ANY reason the LHJ is unable to submit the SNAP-Ed A19-1A on the due date, the LHJ is required to submit a request for an exception to the DOH no later than seven (7) days prior to due date to the DOH SNAP-Ed contract manager. The SNAP-Ed contract manager reserves the right and responsibility to either approve or deny the request for an exception and will reply to the request.

4. Supporting documentation for each month must be submitted with each SNAP-Ed A19-1A.
   a. At the very least this means a copy of an agency's financial expanded/detailed general ledger level report.
   b. Additionally, all receipts, timecards and other supporting documentation, as noted by USDA, must be available upon request.

5. PLEASE NOTE: If an agency is a new SNAP-Ed contractor or has had a fiscal finding, or does not submit adequate and/or accurate backup documentation within the last year, all SNAP-Ed backup documentation must be submitted with each bill and this requirement will continue until further notice by the DOH designated SNAP-Ed contract manager.

Source and Amount of FFY14 Carry Forward & FFY15 Funds	
USDA	**$93,411**

DOH Program Contact
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Pacific County Health & Human Services Department

EXHIBIT B-1
ALLOCATIONS
Contract Term: 2015-2017

Contract Number: C17121
Date: January 15, 2015

Chart of Accounts Program Title	Federal Award Identification #	Amend #	CFDA*	BARS Revenue Code**	Statement of Work Funding Period Start Date	Statement of Work Funding Period End Date	DOH Use Only Chart of Accounts Funding Period Start Date	DOH Use Only Chart of Accounts Funding Period End Date	Amount	Funding Period Sub Total	Chart of Accounts Total
FFY15 DSHS SNAP-Ed IAR	15157WAWA5S7504	Amend 1	10.561	333.10.56	01/01/15	09/30/15	10/01/14	09/30/15	$70,058	$70,058	$93,411
FFY14 DSHS SNAP-Ed IAR Carryforward	14147WAWA5S7503	Amend 1	10.561	333.10.56	01/01/15	09/30/15	10/01/14	09/30/15	$23,353	$23,353	
FFY17 USDA WIC NLS	NGA Not Received	N/A	10.557	333.10.55	10/01/16	12/31/16	10/01/16	12/31/16	$26,643	$26,643	$213,141
FFY16 USDA WIC NLS	NGA Not Received	N/A	10.557	333.10.55	10/01/15	09/30/16	10/01/15	09/30/16	$106,570	$106,570	
FFY15 USDA WIC NLS	15157WAWA7W1003	N/A	10.557	333.10.55	01/01/15	09/30/15	10/01/14	09/30/15	$79,928	$79,928	
FFY15 USDA Breastfeed Peer Counsel	NGA Not Received	N/A	10.557	333.10.55	01/01/15	09/30/15	10/01/14	09/30/15	$10,955	$10,955	$10,955
FFY14 EPR LHJ Funding	U90TP000559	N/A	93.069	333.93.06	01/01/15	06/30/15	07/01/14	06/30/15	$32,967	$32,967	$32,967
YR4 Title X Fed (2012-2016)	FPHPA106023	N/A	93.217	333.93.21	01/01/15	12/30/15	12/31/14	12/30/15	$8,010	$8,010	$8,010
FFY15 317 Ops	H23IP000762	N/A	93.268	333.93.26	01/01/15	12/31/15	01/01/15	12/31/15	$2,034	$2,034	$2,034
FFY15 AFIX	H23IP000762	N/A	93.268	333.93.26	01/01/15	12/31/15	01/01/15	12/31/15	$8,279	$8,279	$8,279
FFY15 VFC Ops	H23IP000762	N/A	93.268	333.93.26	01/01/15	12/31/15	01/01/15	12/31/15	$1,881	$1,881	$1,881
FFY15 VFC Ordering	H23IP000762	N/A	93.268	333.93.26	01/01/15	12/31/15	01/01/15	12/31/15	$1,923	$1,923	$1,923
FFY15 MCHBG CBP ConCon	B04MC28134	N/A	93.994	333.93.99	01/01/15	09/30/15	10/01/14	09/30/15	$28,226	$28,226	$28,226
FY15 Title X State (2015 Cost Share)		Amend 1	N/A	334.04.91	01/01/15	06/30/15	01/01/15	06/30/15	$669	$11,503	$11,503
FY15 Title X State (2015 Cost Share)		N/A	N/A	334.04.91	01/01/15	06/30/15	01/01/15	06/30/15	$10,834		
TBD [FY16 Title X State (2015 Cost Share)]		N/A	N/A	334.04.91	07/01/15	12/31/15	07/01/15	12/31/15	$10,588	$10,588	$10,588
Rec Shellfish / Biotoxin (PSAA)		N/A	N/A	334.04.93	01/01/15	06/30/15	07/01/13	06/30/15	$1,400	$1,400	$1,400
TOTAL									**$424,318**	**$424,318**	

Total consideration:	**$330,238**
	$94,080
GRAND TOTAL	**$424,318**

GRAND TOTAL	**$424,318**
Total Fed	**$400,827**
Total State	**$23,491**

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

Exhibit C-1 Schedule of Federal Awards

AMENDMENT #1

Date: January 15, 2015

PACIFIC COUNTY HEALTH DEPT - SWV0007195-11
CONTRACT C17121 - Pacific County Health & Human Services Department
CONTRACT PERIOD 1/1/2015-12/31/2017

Chart of Accounts Program Title	BARS	DOH Federal Award Date	Total Amt Federal Award	Allocation Period Start Date	Allocation Period End Date	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Award Identification Number	Federal Grant Award Name
FFY15 USDA BREASTFEED PEER COUNSEL	333.10.55	NGA Not Received	NGA Not Received	01/01/15	09/30/15	$10,955	10.557	Special Supplemental Nutrition Program for Women, Infants, and Children	Department of Agriculture Food and Nutrition Service	NGA Not Received	NGA Not Received
FFY15 USDA WIC NLS	333.10.55	10/07/14	$15,498,793	01/01/15	09/30/15	$79,928	10.557	Special Supplemental Nutrition Program for Women, Infants, and Children	Department of Agriculture Food and Nutrition Service	15157WAWA7W1003	FFY15 WIC ADMINISTRATION
FFY16 USDA WIC NLS	333.10.55	NGA Not Received	NGA Not Received	10/01/15	09/30/16	$106,570	10.557	Special Supplemental Nutrition Program for Women, Infants, and Children	Department of Agriculture Food and Nutrition Service	NGA Not Received	NGA Not Received
FFY17 USDA WIC NLS	333.10.55	NGA Not Received	NGA Not Received	10/01/16	12/31/16	$26,643	10.557	Special Supplemental Nutrition Program for Women, Infants, and Children	Department of Agriculture Food and Nutrition Service	NGA Not Received	NGA Not Received
FFY14 DSHS SNAP-ED IAR CARRYFORWARD	333.10.56	09/29/14	$1,114,721	01/01/15	09/30/15	$23,353	10.561	State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	Department of Agriculture Food and Nutrition Service	14147WAWA5S7503	Supplemental Nutrition Assistance Program Education (SNAP-Ed)
FFY15 DSHS SNAP-ED IAR	333.10.56	09/29/14	$2,870,126	01/01/15	09/30/15	$70,058	10.561	State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	Department of Agriculture Food and Nutrition Service	15157WAWA5S7504	Supplemental Nutrition Assistance Program Education (SNAP-Ed)
FFY14 EPR LHJ FUNDING	333.93.06	06/30/14	$12,663,227	01/01/15	06/30/15	$32,967	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	U90TP000559	TP12-1201 HPP AND PHEP COOPERATIVE AGREEMENTS
YR4 TITLE X FED (2012-2016)	333.93.21	12/12/13	$5,687,200	01/01/15	12/30/15	$8,010	93.217	Family Planning_Services	Department of Health and Human Services Office of Population Affairs	FPHPA106023	TITLE X FAMILY PLANNING SERVICES GRANT
FFY15 317 OPS	333.93.26	12/17/14	$3,437,046	01/01/15	12/31/15	$2,034	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	H23IP000762	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY15 AFIX	333.93.26	12/17/14	$3,437,046	01/01/15	12/31/15	$8,279	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	H23IP000762	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY15 VFC OPS	333.93.26	12/17/14	$3,437,046	01/01/15	12/31/15	$1,881	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	H23IP000762	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY15 VFC ORDERING	333.93.26	12/17/14	$3,437,046	01/01/15	12/31/15	$1,923	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	H23IP000762	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY15 MCHBG CBP CONCON	333.93.99	10/21/14	$1,734,378	01/01/15	09/30/15	$28,226	93.994	Maternal and Child Health Services Block Grant to the States	Department of Health and Human Services Health Resources and Services Administration	B04MC28134	MATERNAL AND CHILD HEALTH SERVICES
					TOTAL	$400,827					