

Approved: 8/9/2023
Effective: 8/25/2023

SNOHOMISH COUNTY COUNCIL
Snohomish County, Washington

ORDINANCE NO. 23-068

APPROVING AMENDMENT NO. 14 TO CONSOLIDATED CONTRACT WITH
WASHINGTON STATE DEPARTMENT OF HEALTH AND ADDING AUTHORITY FOR
FUTURE AMENDMENTS REGARDING MONKEYPOX PREVENTION & RESPONSE

WHEREAS, the Snohomish Health District was integrated into Snohomish County effective December 31, 2022, and now operates as the Snohomish County Health Department; and

WHEREAS, prior to its integration into Snohomish County, the Snohomish Health District entered into a consolidated contract with the Washington State Department of Health, and the consolidated contract was subsequently amended on ten occasions; and

WHEREAS, the Snohomish County Council approved and authorized the County Executive, or designee, to execute Amendment No. 11 and all subsequent amendments to the consolidated contract with the Washington State Department of Health that support the programmatic work listed in Exhibit B; and

WHEREAS, the Snohomish County Health Department wishes to perform that work to aid public health in the county; and

WHEREAS, the consolidated contract funds public health work by the Snohomish County Department of Health as a subrecipient and subcontractor for grant-funded programs and other funded public health work, including those identified in Exhibit B attached hereto; and

WHEREAS, the parties have need to enter into a further Amendment No. 14 to adjust the Statement of Work for the COVID-19 LHJ Vaccination-ARPA program and to add a Statement of Work for Monkeypox Prevention & Response; and

WHEREAS, the parties anticipate further amendments to the consolidated contract to further adjust the activities and deliverables for programmatic work; and

WHEREAS, the consolidated contract provides funding for numerous public health services to support the health of the residents of Snohomish County; and

WHEREAS, the Washington State Department of Health and the Snohomish County Health Department wish to continue this partnership; and

WHEREAS, the County Council held a public hearing on August 9, 2023, to consider approval of Amendment No. 14 to the consolidated contract with the

1 Washington State Department of Health to carry out public health work and to authorize
2 the Snohomish County Executive to enter into such agreement in substantially the form
3 attached as Exhibit B, and further to grant the Snohomish County Executive authority to
4 enter into future amendments to the consolidated contract when such amendments
5 relate to the existing grant-funded programs;

6
7 NOW, THEREFORE, BE IT ORDAINED:
8

9 Section 1. The County Council hereby adopts the foregoing recitals as findings of
10 fact and conclusions as if set forth in full herein.
11

12 Section 2. The County Council hereby approves and authorizes the County
13 Executive, or designee, to execute Amendment No. 14 to the consolidated contract with the
14 Washington State Department of Health in substantially the form attached as Exhibit A.
15


16 Section 3. The County Council hereby authorizes the County Executive, or
17 designee, to execute all subsequent amendments to the consolidated contract with the
18 Washington State Department of Health that support the programmatic work listed in
19 Exhibit B.
20

21 PASSED this 9th day of August, 2023.
22

23 SNOHOMISH COUNTY COUNCIL
24 Snohomish County, Washington
25


26 
27 _____
28 Council Chair

29 ATTEST:
30

31 
32 _____
33 Deputy Clerk of the Council
34

35 (X) APPROVED
36 () EMERGENCY
37 () VETOED
38

39 DATE: August 15, 2023
40

41 
42 _____
43 County Executive

44 ATTEST:
45

46 

1 Approved as to form only:

2

3  06-23-2023

4 Deputy Prosecuting Attorney

EXHIBIT A

SNOHOMISH COUNTY THROUGH ITS HEALTH DEPARTMENT 2022-2024 CONSOLIDATED CONTRACT

CONTRACT NUMBER: CLH31027

AMENDMENT NUMBER: 14

PURPOSE OF CHANGE: To amend this contract between the DEPARTMENT OF HEALTH hereinafter referred to as "DOH", and SNOHOMISH COUNTY through its health 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:

- 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:
Mpox Prevention & Response - Effective July 1, 2022
 - Amends Statements of Work for the following programs:
COVID-19 LHJ Vaccination-ARPA - Effective November 1, 2022
 - Deletes Statements of Work for the following programs:
- Exhibit B-14 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-13 Allocations as follows:
 - Increase of **\$669,210** for a revised maximum consideration of **\$25,090,827**.
 - 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.

| | |
|---|--|
| SNOHOMISH COUNTY | STATE OF WASHINGTON DEPARTMENT OF HEALTH |
| Signature:  <small>Lacey Harper (Aug 15, 2023 13:30 PDT)</small> | Signature:  <small>Brenda Henrikson (Aug 15, 2023 13:48 PDT)</small> |
| Date: Aug 15, 2023 | Date: Aug 15, 2023 |

APPROVED AS TO FORM ONLY
Assistant Attorney General

| 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 Start Date | LHJ Funding End Date | Chart of Accounts Start Date | Chart of Accounts End Date | | | |
| | | | | | Period | Period | Period | Period | | | |
| CSFRF CTS LHJ Allocation | NGA Not Received | Amd 5, 11 | 21.027 | 333.21.02 | 01/01/22 | 06/30/23 | 01/01/22 | 06/30/23 | \$684,964 | \$684,964 | \$684,964 |
| LHJ COVID-19 Gap Supplemental | NGA Not Received | Amd 14 | 21.027 | 333.21.02 | 01/01/23 | 06/30/23 | 01/01/23 | 06/30/23 | \$664,210 | \$664,210 | \$664,210 |
| LHJ Vaccination ARPA | SLFRP0002 | Amd 10 | 21.027 | 333.21.02 | 11/01/22 | 06/30/23 | 11/01/22 | 06/30/23 | \$80,500 | \$80,500 | \$80,500 |
| FFY21 CDC Cities Readiness BP3 | NU90TP922043 | Amd 4 | 93.069 | 333.93.06 | 01/01/22 | 06/30/22 | 07/01/21 | 06/30/22 | \$78,676 | \$131,504 | \$131,504 |
| FFY21 CDC Cities Readiness BP3 | NU90TP922043 | Amd 2 | 93.069 | 333.93.06 | 01/01/22 | 06/30/22 | 07/01/21 | 06/30/22 | \$52,828 | \$131,504 | \$131,504 |
| FFY22 PHEP CRI BP4 | NU90TP922043 | Amd 7 | 93.069 | 333.93.06 | 07/01/22 | 06/30/23 | 07/01/22 | 06/30/23 | \$146,153 | \$146,153 | \$146,153 |
| 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 | \$535,318 | \$535,318 | \$749,445 |
| FFY21 PHEP BP3 LHJ Funding | NU90TP922043 | Amd 2 | 93.069 | 333.93.06 | 01/01/22 | 06/30/22 | 07/01/21 | 06/30/22 | \$214,127 | \$214,127 | \$214,127 |
| FFY23 TB Elimination-FPH | NU52PS910221 | Amd 11 | 93.116 | 333.93.11 | 01/01/23 | 12/31/23 | 01/01/23 | 12/31/23 | \$97,815 | \$97,815 | \$193,264 |
| FFY22 TB Elimination-FPH | NU52PS910221 | Amd 1 | 93.116 | 333.93.11 | 01/01/22 | 12/31/22 | 01/01/22 | 12/31/22 | \$95,449 | \$95,449 | \$193,264 |
| FFY22 TB Uniting for Ukraine Supp | NU52PS910221 | Amd 12 | 93.116 | 333.93.11 | 07/01/22 | 09/30/23 | 07/01/22 | 09/30/23 | \$100,000 | \$100,000 | \$143,542 |
| FFY22 TB Uniting for Ukraine Supp | NU52PS910221 | Amd 9 | 93.116 | 333.93.11 | 05/21/22 | 12/31/22 | 05/21/22 | 12/31/22 | \$43,542 | \$43,542 | \$143,542 |
| FFY22 Overdose Data to Action Prev | NU17CE925007 | Amd 11 | 93.136 | 333.93.13 | 09/01/22 | 08/31/23 | 09/01/22 | 08/31/23 | \$59,687 | \$209,687 | \$322,862 |
| FFY22 Overdose Data to Action Prev | NU17CE925007 | Amd 7 | 93.136 | 333.93.13 | 09/01/22 | 08/31/23 | 09/01/22 | 08/31/23 | \$150,000 | \$209,687 | \$322,862 |
| FFY21 Overdose Data to Action Prev | NU17CE925007 | Amd 3 | 93.136 | 333.93.13 | 01/01/22 | 08/31/22 | 09/01/21 | 08/31/22 | \$113,175 | \$113,175 | \$322,862 |
| COVID19 Vaccines | NH23IP922619 | Amd 7 | 93.268 | 333.93.26 | 01/01/22 | 06/30/24 | 07/01/20 | 06/30/24 | \$22,748 | \$2,092,701 | \$2,092,701 |
| COVID19 Vaccines | NH23IP922619 | Amd 4 | 93.268 | 333.93.26 | 01/01/22 | 06/30/24 | 07/01/20 | 06/30/24 | \$2,069,953 | \$2,092,701 | \$2,092,701 |
| COVID19 Vaccines R4 | NH23IP922619 | Amd 5 | 93.268 | 333.93.26 | 01/01/22 | 06/30/24 | 07/01/20 | 06/30/24 | \$5,000 | \$2,865,603 | \$2,865,603 |
| COVID19 Vaccines R4 | NH23IP922619 | Amd 1 | 93.268 | 333.93.26 | 01/01/22 | 06/30/24 | 07/01/20 | 06/30/24 | \$2,860,603 | \$2,865,603 | \$2,865,603 |
| Improving Vaccinations AA1 | NH23IP922619 | Amd 5 | 93.268 | 333.93.26 | 07/01/22 | 06/30/23 | 07/01/22 | 06/30/23 | \$42,840 | \$42,840 | \$42,840 |
| FFY23 PPHF Ops | NH23IP922619 | Amd 7 | 93.268 | 333.93.26 | 07/01/22 | 06/30/23 | 07/01/22 | 06/30/23 | \$21,500 | \$21,500 | \$80,512 |
| FFY22 PPHF Ops | NH23IP922619 | Amd 3 | 93.268 | 333.93.26 | 01/01/22 | 06/30/22 | 07/01/21 | 06/30/22 | \$20,793 | \$20,793 | \$80,512 |
| FFY22 PPHF Ops | NH23IP922619 | Amd 3 | 93.268 | 333.93.26 | 01/01/22 | 06/30/22 | 07/01/21 | 06/30/22 | \$38,219 | \$38,219 | \$80,512 |
| FFY23 VFC IQIP | NH23IP922619 | Amd 7 | 93.268 | 333.93.26 | 07/01/22 | 06/30/23 | 07/01/22 | 06/30/23 | \$74,468 | \$74,468 | \$74,468 |
| FFY23 VFC Ops | NH23IP922619 | Amd 5 | 93.268 | 333.93.26 | 07/01/22 | 06/30/23 | 07/01/22 | 06/30/23 | \$45,150 | \$45,150 | \$50,066 |
| FFY22 VFC Ops | NH23IP922619 | Amd 3 | 93.268 | 333.93.26 | 01/01/22 | 06/30/22 | 07/01/21 | 06/30/22 | \$4,916 | \$4,916 | \$50,066 |

Indirect Rate January 1, 2022 through December 31, 2022: 10.50%
Indirect Rate January 1, 2023-Indefinite: 10.00% De-Minimis

| 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 Start Date | LHJ Funding End Date | Chart of Accounts Funding Start Date | Chart of Accounts Funding End Date | | | |
| FFY20 ELC EDE LHJ Allocation | NU50CK000515 | Amd 4, 9 | 93.323 | 333.93.32 | 01/01/22 | 07/31/23 | 01/15/21 | 07/31/24 | (\$44,632) | \$5,691,480 | \$5,691,480 |
| 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 | \$5,736,112 | | |
| FFY21 NH & LTC Strike Teams HAI ELC | NU50CK000515 | Amd 9 | 93.323 | 333.93.32 | 09/01/22 | 07/31/24 | 08/01/21 | 07/31/24 | \$50,059 | \$50,059 | \$50,059 |
| FFY21 SNF Strike Teams HAI ELC | NU50CK000515 | Amd 9 | 93.323 | 333.93.32 | 09/01/22 | 07/31/24 | 08/01/21 | 07/31/24 | \$50,059 | \$50,059 | \$50,059 |
| FFY23 Vector-borne T2&3 Epi ELC FPH | NGA Not Received | Amd 13 | 93.323 | 333.93.32 | 08/01/23 | 09/30/23 | 08/01/23 | 09/30/23 | \$1,200 | \$1,200 | \$6,000 |
| FFY22 Vector-borne T2&3 Epi ELC FPH | NU50CK000515 | Amd 13 | 93.323 | 333.93.32 | 08/01/22 | 07/31/23 | 08/01/22 | 07/31/23 | \$1,800 | \$3,300 | \$3,300 |
| FFY22 Vector-borne T2&3 Epi ELC FPH | NU50CK000515 | Amd 5, 13 | 93.323 | 333.93.32 | 08/01/22 | 07/31/23 | 08/01/22 | 07/31/23 | \$1,500 | | |
| FFY21 Vector-borne T2&3 Epi ELC FPH | NU50CK000515 | Amd 5 | 93.323 | 333.93.32 | 06/01/22 | 07/31/22 | 08/01/21 | 07/31/22 | \$1,500 | \$1,500 | \$1,500 |
| FFY21 Tobacco-Vape Prev Comp 1 | NU58DP006808 | Amd 2 | 93.387 | 333.93.38 | 01/01/22 | 04/28/22 | 04/29/21 | 04/28/22 | \$10,379 | \$10,379 | \$10,379 |
| Refugee Health COVID Hlth Disparities | NH75OT000042 | Amd 9 | 93.391 | 333.93.39 | 01/01/22 | 05/31/24 | 07/01/21 | 05/31/24 | \$100,000 | \$200,000 | \$200,000 |
| Refugee Health COVID Hlth Disparities | NH75OT000042 | Amd 2, 9 | 93.391 | 333.93.39 | 01/01/22 | 05/31/24 | 07/01/21 | 05/31/24 | \$100,000 | | |
| FFY23 HIV Prev Grant -FPH | NU62PS924528 | Amd 7 | 93.940 | 333.93.94 | 01/01/23 | 06/30/23 | 01/01/23 | 12/31/23 | \$55,331 | \$55,331 | \$165,993 |
| FFY22 HIV Prev Grant -FPH | NU62PS924528 | Amd 7 | 93.940 | 333.93.94 | 07/01/22 | 12/31/22 | 01/01/22 | 12/31/22 | \$55,331 | \$55,331 | \$55,331 |
| FFY22 HIV Prev Grant -FPH | NU62PS924528 | Amd 1 | 93.940 | 333.93.94 | 01/01/22 | 06/30/22 | 01/01/22 | 12/31/22 | \$55,331 | \$55,331 | \$55,331 |
| FFY23 STD Prev PCHD-FPH | NH25PS005146 | Amd 7 | 93.977 | 333.93.97 | 01/01/23 | 06/30/23 | 01/01/23 | 12/31/23 | \$35,250 | \$35,250 | \$105,750 |
| FFY22 STD Prev PCHD-FPH | NH25PS005146 | Amd 7 | 93.977 | 333.93.97 | 07/01/22 | 12/31/22 | 01/01/22 | 12/31/22 | \$35,250 | \$35,250 | \$35,250 |
| FFY22 STD Prev PCHD-FPH | NH25PS005146 | Amd 1 | 93.977 | 333.93.97 | 01/01/22 | 06/30/22 | 01/01/22 | 12/31/22 | \$35,250 | \$35,250 | \$35,250 |
| FFY23 STD Prev Supplemental [PCHD] | NH25PS005146 | Amd 7 | 93.977 | 333.93.97 | 01/01/23 | 06/30/23 | 01/01/23 | 12/31/23 | \$173,112 | \$173,112 | \$507,676 |
| FFY22 STD Prev Supplemental [PCHD] | NH25PS005146 | Amd 7 | 93.977 | 333.93.97 | 07/01/22 | 12/31/22 | 01/01/22 | 12/31/22 | \$173,111 | \$173,111 | \$173,111 |
| FFY22 STD Prev Supplemental [PCHD] | NH25PS005146 | Amd 1 | 93.977 | 333.93.97 | 01/01/22 | 06/30/22 | 01/01/22 | 12/31/22 | \$161,453 | \$161,453 | \$161,453 |
| FFY23 MCHBG LHJ Contracts | B04MC47453 | Amd 7 | 93.994 | 333.93.99 | 10/01/22 | 09/30/23 | 10/01/22 | 09/30/23 | \$444,879 | \$444,879 | \$444,879 |
| FFY22 MCHBG LHJ Contracts | B04MC45251 | Amd 4 | 93.994 | 333.93.99 | 01/01/22 | 09/30/22 | 10/01/21 | 09/30/22 | \$0 | \$0 | \$0 |
| FFY22 MCHBG LHJ Contracts | B04MC45251 | Amd 1 | 93.994 | 333.93.99 | 01/01/22 | 09/30/22 | 10/01/21 | 09/30/22 | \$333,659 | \$333,659 | \$333,659 |
| FFY21 MCHBG Special Project | B04MC40169 | Amd 4 | 93.994 | 333.93.99 | 01/01/22 | 09/30/22 | 10/01/21 | 09/30/22 | \$352,122 | \$352,122 | \$352,122 |
| State Disease Control & Prev-FPH | | Amd 7 | N/A | 334.04.91 | 07/01/22 | 12/31/22 | 07/01/21 | 06/30/23 | \$151,496 | \$151,496 | \$244,293 |
| State Disease Control & Prev-FPH | | Amd 2 | N/A | 334.04.91 | 01/01/22 | 06/30/22 | 07/01/21 | 06/30/23 | \$32,765 | \$92,797 | \$92,797 |
| State Disease Control & Prev-FPH | | Amd 1 | N/A | 334.04.91 | 01/01/22 | 06/30/22 | 07/01/21 | 06/30/23 | \$60,032 | | |
| SFY22 Marijuana Education | | Amd 2 | N/A | 334.04.93 | 01/01/22 | 06/30/22 | 07/01/21 | 06/30/23 | \$14,658 | \$14,658 | \$14,658 |

Indirect Rate January 1, 2022 through December 31, 2022: 10.50%
Indirect Rate January 1, 2023-Indefinite: 10.00% De-Minimus

| Chart of Accounts Program Title | Federal Award Identification # | Amd # | Assist List #* | BARS Revenue Code** | Statement of Work | | DOH Use Only | | Amount | Funding Period SubTotal | Chart of Accounts Total |
|--|--------------------------------|---------------|----------------|---------------------|------------------------|----------------------|--------------------------------------|------------------------------------|----------------|-------------------------|-------------------------|
| | | | | | LHJ Funding Start Date | LHJ Funding End Date | Chart of Accounts Funding Start Date | Chart of Accounts Funding End Date | | | |
| Mpox Gap Response | | Amd 14 | N/A | 334.04.93 | 07/01/22 | 06/30/23 | 07/01/22 | 06/30/23 | \$5,000 | \$5,000 | \$5,000 |
| Rec Shellfish/Biotoxin | | Amd 1 | N/A | 334.04.93 | 01/01/22 | 06/30/23 | 07/01/21 | 06/30/23 | \$10,000 | \$10,000 | \$10,000 |
| Small Onsite Management (ALEA) | | Amd 1 | N/A | 334.04.93 | 07/01/22 | 06/30/23 | 07/01/21 | 06/30/23 | \$60,000 | \$60,000 | \$75,000 |
| Small Onsite Management (ALEA) | | Amd 1 | N/A | 334.04.93 | 01/01/22 | 06/30/22 | 07/01/21 | 06/30/23 | \$15,000 | \$15,000 | \$75,000 |
| SFY22 Youth Tobacco Vapor Products | | Amd 2 | N/A | 334.04.93 | 01/01/22 | 06/30/22 | 07/01/21 | 06/30/23 | \$55,114 | \$55,114 | \$55,114 |
| SFY20 Bezos Vroom | | Amd 1 | N/A | 334.04.98 | 01/01/22 | 02/28/22 | 01/01/20 | 04/30/22 | \$7,625 | \$7,625 | \$7,625 |
| RW FFY22 Grant Year Local (Rebate) | | Amd 1 | N/A | 334.04.98 | 04/01/22 | 06/30/22 | 04/01/22 | 03/31/23 | \$7,858 | \$7,858 | \$27,706 |
| RW FFY21 Grant Year Local (Rebate) | | Amd 2 | N/A | 334.04.98 | 01/01/22 | 03/31/22 | 04/01/21 | 03/31/22 | \$11,990 | \$19,848 | \$27,706 |
| RW FFY21 Grant Year Local (Rebate) | | Amd 1 | N/A | 334.04.98 | 01/01/22 | 03/31/22 | 04/01/21 | 03/31/22 | \$7,858 | \$7,858 | \$27,706 |
| FPHS-LHI-Proviso (YR2) | | Amd 13 | N/A | 336.04.25 | 07/01/22 | 06/30/23 | 07/01/21 | 06/30/23 | \$350,000 | \$5,566,000 | \$8,716,000 |
| FPHS-LHI-Proviso (YR2) | | Amd 6 | N/A | 336.04.25 | 07/01/22 | 06/30/23 | 07/01/21 | 06/30/23 | \$5,216,000 | \$0 | \$8,716,000 |
| FPHS-LHI-Proviso (YR2) | | Amd 7 | N/A | 336.04.25 | 07/01/22 | 06/30/23 | 07/01/21 | 06/30/23 | (\$3,150,000) | \$0 | \$8,716,000 |
| FPHS-LHI-Proviso (YR2) | | Amd 1 | N/A | 336.04.25 | 07/01/22 | 06/30/23 | 07/01/21 | 06/30/23 | \$3,150,000 | \$3,150,000 | \$8,716,000 |
| FPHS-LHI-Proviso (YR1) | | Amd 1 | N/A | 336.04.25 | 01/01/22 | 06/30/22 | 07/01/21 | 06/30/23 | \$3,150,000 | \$3,150,000 | \$8,716,000 |
| YR25 SRF - Local Asst (15%) (FO-NW) SS | | Amd 12 | N/A | 346.26.64 | 01/01/23 | 12/31/23 | 01/01/23 | 12/31/23 | \$6,000 | \$6,000 | \$11,200 |
| YR24 SRF - Local Asst (15%) (FO-NW) SS | | Amd 2 | N/A | 346.26.64 | 01/01/22 | 12/31/22 | 07/01/21 | 06/30/23 | \$1,600 | \$5,200 | \$11,200 |
| YR24 SRF - Local Asst (15%) (FO-NW) SS | | Amd 1 | N/A | 346.26.64 | 01/01/22 | 12/31/22 | 07/01/21 | 06/30/23 | \$3,600 | \$11,200 | \$11,200 |
| Sanitary Survey Fees (FO-NW) SS-State | | Amd 12 | N/A | 346.26.65 | 01/01/22 | 12/31/23 | 07/01/21 | 12/31/23 | \$6,000 | \$6,000 | \$11,200 |
| Sanitary Survey Fees (FO-NW) SS-State | | Amd 2, 12 | N/A | 346.26.65 | 01/01/22 | 12/31/23 | 07/01/21 | 12/31/23 | \$1,600 | \$6,000 | \$11,200 |
| Sanitary Survey Fees (FO-NW) SS-State | | Amd 1, 12 | N/A | 346.26.65 | 01/01/22 | 12/31/23 | 07/01/21 | 12/31/23 | \$3,600 | \$6,000 | \$11,200 |
| YR25 SRF - Local Asst (15%) (FO-NW) TA | | Amd 12 | N/A | 346.26.66 | 01/01/23 | 12/31/23 | 01/01/23 | 12/31/23 | \$4,000 | \$4,000 | \$6,000 |
| YR24 SRF - Local Asst (15%) (FO-NW) TA | | Amd 1 | N/A | 346.26.66 | 01/01/22 | 12/31/22 | 07/01/21 | 06/30/23 | \$2,000 | \$2,000 | \$6,000 |

| | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|---------------------|---------------------|---------------------|
| TOTAL | | | | | | | | | \$25,090,827 | \$25,090,827 | \$25,090,827 |
| Total consideration: | | | | | | | | | | | \$8,716,000 |
| GRAND TOTAL | | | | | | | | | | | \$15,554,909 |
| *Catalog of Federal Domestic Assistance | | | | | | | | | | | \$9,535,918 |
| **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: COVID-19 LHJ Vaccination-ARPA - Effective November 1, 2022

Local Health Jurisdiction Name: Snohomish County Health Department

Contract Number: CLH31027

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

| | | |
|---|--|---|
| Funding Source <input checked="" type="checkbox"/> Federal Subrecipient <input type="checkbox"/> State <input type="checkbox"/> Other | Federal Compliance (check if applicable) <input checked="" type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development | Type of Payment <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price |
|---|--|---|

Period of Performance: November 1, 2022 through June 30, 2023

Statement of Work Purpose: The purpose of this statement of work is to support LHJ COVID-19 vaccination utilizing American Rescue Plan Act (ARPA) funding and provide supplemental funding for the LHJ to ensure adequate culturally and linguistically responsive testing, investigation and contract tracing resources to limit the spread of COVID-19.

Revision Purpose: The purpose of this revision is to add LHJ COVID-19 Gap Supplemental funding.

| 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 |
|--|-------------------|---------------------------|-------------------|-------------------------------|-----------------------------|--------------------|--------------------------------|------------------|
| LHJ VACCINATION ARPA | 934V1200 | 21.027 | 333-21.02 | 11/01/22 | 06/30/23 | 80,500 | 0 | 80,500 |
| LHJ COVID-19 GAP SUPPLEMENTAL | 934C0230 | 21.027 | 333-21.02 | 01/01/23 | 06/30/23 | 0 | 664,210 | 664,210 |
| | | | | | | 0 | 0 | 0 |
| | | | | | | 0 | 0 | 0 |
| | | | | | | 0 | 0 | 0 |
| | | | | | | 0 | 0 | 0 |
| TOTALS | | | | | | 80,500 | 664,210 | 744,710 |

| Task # | Activity | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|--------|---|---|----------------------------------|--|
| | <i>Task 1, 2, and 3 Activities Supported by LHJ COVID-19 Gap Supplemental</i> <i>Task 1 Activities Supported by LHJ Vaccination ARPA</i> | | | |
| 1. | Provide vaccination services to increase COVID-19 vaccine availability in the community. Vaccination services are defined as those outside the usual healthcare delivery method, such as pop-up clinics, mobile clinics, non-clinical facilities and may be conducted during non-traditional hours such as evenings and 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, community outreach/messaging or to supplement the work of other community partners in underserved communities | Vaccine availability to the community and prioritized in your jurisdiction's community. | November 1, 2022 - June 30, 2023 | Reimbursement for actual costs incurred, not to exceed total funding consideration amount. Due date: Every 60 days as specified in the ConCon billing instructions. |

| Task # | Activity | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|--------|--|---|--|-----------------------------------|
| IA. | <p>and may include administration costs for COVID-19 vaccine.</p> <p>Vaccination data – will be maintained according to current state and federal requirements.</p> <p>Vaccine Registration Systems – If a local jurisdiction or region does not have a registration system(s) then include internet based, phone option and other methods to ensure equitable registration. The state PrepMod system and tools will be available for use.</p> | <p>Submission of vaccine use into WA IIS database within 48 hours of use.</p> <p>Jurisdiction/Regions will ensure a fair and equitable process for registration of eligible Washingtonians across all available modalities.</p> | <p>Within two (2) days of vaccine use</p> | |
| 1B. | <p>Specific itemized breakdown of activities and costs from our partners for vaccine efforts and keeping Washington safe.</p> | <p>Final written report including activities completed and how LHJ addressed equitable distribution of the vaccine, community outreach and messaging.</p> | <p>Report due within 30 days of the end of each quarter listed below: Year 1 Quarter 2 November 1, 2022-December 31, 2022 Year 1 Quarter 3 January 1, 2023-March 30, 2023 Year 1 Quarter 4 April 1, 2023-June 30, 2023</p> | |
| 2 | <p><i>Participate in public health emergency preparedness and response activities for COVID-19. This may include surveillance, epidemiology, laboratory capacity, infection control, mitigation, communications and or other preparedness and response activities for COVID-19.</i></p> <p><i>Examples of key activities include:</i></p> <ul style="list-style-type: none"> • <i>Incident management for the response</i> • <i>Testing</i> • <i>Case Investigation/Contact Tracing</i> • <i>Sustainable isolation and quarantine</i> • <i>Care coordination</i> • <i>Surge management</i> • <i>Data reporting</i> <p><i>NOTE: The purpose of this agreement is to supplement existing funds for local health jurisdictions to carry out surveillance, epidemiology, case investigations and contact tracing, laboratory capacity, infection control, mitigation,</i></p> | <p><i>See Special Requirements below.</i></p> | <p><i>See Special Requirements below.</i></p> | |

| Task # | Activity | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|--------|--|--|---|-----------------------------------|
| 3 | <p><i>communications, community engagement, and other public health preparedness and response activities for COVID-19.</i></p> <p>1) <i>LHJ Active monitoring activities. In partnership with WA DOH and neighboring Tribes, the LHJ must ensure adequate culturally and linguistically responsive testing, investigation and contact tracing resources to limit the spread disease. LHJs must conduct the following activities in accordance with the guidance to be provided by DOH.</i></p> <p>a. <i>Allocate enough funding to ensure the following Contact Tracing and Case Investigation Support: Hire a minimum of 1.0 data entry FTE to assure system requirements for task 2.1.a.</i></p> <p>i. <i>Contact tracing</i></p> <ol style="list-style-type: none"> 1. <i>Strive to maintain the capacity to conduct targeted investigations as appropriate.</i> 2. <i>Have staff that reflect the demographic makeup of the jurisdiction and who can provide culturally and linguistically competent and responsive services. In addition, or alternatively, enter into an agreement(s) with Tribal, community-based and/or culturally-specific organizations to provide such services. DOH centralized investigations will count towards this minimum.</i> 3. <i>Ensure all contact tracing staff are trained in accordance with DOH investigative guidelines and data entry protocols.</i> 4. <i>Coordinate with Tribal partners in conducting contact tracing for Tribal members.</i> 5. <i>Ensure contact tracing and case investigations activities meet DOH case and Contact Tracing Metrics. (Metrics to be determined collaboratively by DOH, LHJs and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics.</i> <p>ii. <i>Case investigation</i></p> | <p><i>Data collected and reported into DOH systems daily.</i></p> <p><i>Enter all contact tracing data in CREST following guidance from-DOH.</i></p> | <p><i>Enter performance metrics daily into DOH identified systems</i></p> <p><i>Quarterly performance reporting updates</i></p> | |

| Task # | Activity | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|--------|--|--|---------------------|-----------------------------------|
| | <ol style="list-style-type: none"> 1. Strive to maintain the capacity to conduct targeted investigations as appropriate. 2. Enter all case investigation and outbreak data in WDRS following DOH guidance. <ol style="list-style-type: none"> a) Strive to enter all case investigation and outbreak data into CREST as directed by DOH. b) Ensure all staff designated to utilize WDRS have access and are trained in the system. c) Include if new positive cases are tied to a known existing positive case or indicate community spread. d) Conduct targeted case investigation and monitor outbreaks. e) Coordinate with Tribal partners in conducting case investigations for tribal members. 3. Ensure contact tracing and case investigation activities meet DOH Case and Contact Tracing Metrics. (Metrics to be determined collaboratively by DOH, LHJs, and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics. <ol style="list-style-type: none"> b. Testing <ol style="list-style-type: none"> i. Work with partners and Tribes to ensure testing is available to every person within the jurisdiction meeting current DOH criteria for testing and other local testing needs. ii. Work with partners and Tribes to ensure testing is provided in a culturally and linguistically responsive manner with an emphasis on making testing available to disproportionately impacted communities and as a part of the jurisdiction's contact tracing strategy. iii. Maintain a current list of entities providing COVID-19 testing and at what volume. Provide reports to DOH on testing locations and volume as requested. | <p><i>Enter all case investigation data in WDRS following guidance from DOH.</i></p> <p><i>Maintain a current list of entities providing COVID-19 testing and at what volume. Provide reports to DOH Contract manager on testing</i></p> | | |

| Task # | Activity | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|--------|---|--|---------------------|-----------------------------------|
| | <p><i>c. Surveillance FTE support at a minimum of .5 FTE Epidemiologist to support daily reporting needs below.</i></p> <ul style="list-style-type: none"> <i>i. Ensure all COVID positive lab test results from LHJ are entered in to WDRS by 1) entering data directly in to WDRS, 2) sending test results to DOH to enter; or 3) working with DOH and entities conducting tests to implement an electronic method for test result submission.</i> <i>ii. Maintain records of all COVID negative lab test results from the LHJ and enter into WDRS when resources permit or send test results to DOH.</i> <i>iii. Collaborate with Tribes to ensure Tribal entities with appropriate public health authority have read/write access to WDRS and CREST to ensure that all COVID lab results from their jurisdictions are entered in WDRS or shared with the LHJ or DOH for entry.</i> <p><i>d. Tribal Support. Ensure alignment of contact tracing and support for patients and family by coordinating with local tribes if a patient identified as American Indian/Alaska Native and/or a member of a WA tribe.</i></p> <p><i>e. Support Infection Prevention and control for high-risk populations</i></p> <ul style="list-style-type: none"> <i>i. Migrant and seasonal farmworker support. Partner with farmers, agriculture sector and farmworker service organizations to develop and execute plans for testing, quarantine and isolation, and social service needs for migrant and seasonal farmworkers.</i> <i>ii. Congregate care facilities: In collaboration with the state licensing agency (DSHS), support infection prevention assessments, testing. Infection control and isolation and quarantine protocols in congregate care facilities.</i> <i>iii. High risk businesses or community-based operations. In collaboration with state licensing agencies and Labor and Industries, partner with food processing and</i> | <p><i>locations and volume as requested.</i></p> <p><i>Ensure all COVID positive test results are entered into WDRS within 2 days of receipt</i></p> <p><i>Quarterly performance updates related to culturally and linguistic competency and responsiveness, tribal support, infection prevention and control for high-risk populations, community education and regional active monitoring activities.</i></p> <p><i>Performance update should include status of all projects listed.</i></p> | | |

| Task # | Activity | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|--------|---|---|---------------------|-----------------------------------|
| | <p><i>manufacturing businesses to ensure adequate practices to prevent COVID-19 exposure, conduct testing and respond to outbreaks.</i></p> <ul style="list-style-type: none"> <i>iv. Healthcare: Support infection prevention and control assessments, testing, cohorting, and isolation procedures. Provide educational resources to a variety of healthcare setting types (e.g., nursing homes, hospitals, dental, dialysis).</i> <i>v. Non-healthcare settings that house vulnerable populations: In collaboration with state corrections agency (DOC) and other state partners, support testing, infection control, isolation and quarantine and social services and wraparound supports for individuals living or temporarily residing in congregate living settings, including detention centers, prisons, jails, transition housing, homeless shelters, and other vulnerable populations.</i> <i>vi. Schools: In collaboration with OSPI and local health jurisdictions, support infection prevention and control and outbreak response in K-12 and university school settings.</i> <p><i>f. Ensure adequate resources are directed towards H2A housing facilities within communities, fishing industries and long-term care facilities to prevent and control disease transmission. Funds can be used to hire support staff, provide incentives or facility-based funding for onsite infection prevention efforts, etc.</i></p> <ul style="list-style-type: none"> <i>g. Community education. Work with Tribes and partners to provide culturally and linguistically responsive community outreach and education related to COVID-19.</i> <i>h. Establish sustainable isolation and quarantine (I&Q) measures in accordance with WAC 246-100-045 (Conditions and principles for isolation or quarantine).</i> <ul style="list-style-type: none"> <i>i. Have at least one (1) location for conducting I&Q operations identified and confirmed. This</i> | <p><i>Quarterly performance updates to include name, address and capacity of identified location that can support isolation and quarantine, and confirmation of</i></p> | | |

| Task # | Activity | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|--------|---|---|---------------------|-----------------------------------|
| | <p><i>location should be sufficient for supporting I&Q services that are adequate for the population for your jurisdiction and have an ability to expand if needed. This can be through contract/formal agreement; alternatively, the jurisdiction may establish with an adjacent jurisdiction a formal agreement to provide the isolation and quarantine capacity adequate to the population for your jurisdiction with the ability to expand.</i></p> <ul style="list-style-type: none"> <i>ii. Maintain ongoing census data for isolation and quarantine for your population.</i> <i>iii. Planning must incorporate transfer or receipt of people requiring I&Q support to and from adjacent jurisdictions or state facilities in the event of localized increased need.</i> <i>iv. Planning must incorporate indicators for activating and surging to meet demand and describe the process for coordinating requests for state I&Q support, either through mobile teams or the state facility.</i> | <p><i>appropriate planning and coordination as required.</i></p> <p><i>Report census numbers to include historic total by month and monthly total for current quarter to date</i></p> | | |

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.

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

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

Special Requirements:

A report on the specific areas the LHJ partners have spent the ARPA vaccine dollars if the legislature requests this information.

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

DOH Program Name or Title: Mpox Prevention & Response - Effective July 1, 2022

Local Health Jurisdiction Name: Snohomish County Health Department
Contract Number: CLH31027

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

| | | |
|---|---|---|
| Funding Source <input type="checkbox"/> Federal <Select One> <input checked="" type="checkbox"/> State <input type="checkbox"/> Other | Federal Compliance (check if applicable) <input type="checkbox"/> FFATA (Transparency Act) <input type="checkbox"/> Research & Development | Type of Payment <input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Fixed Price |
|---|---|---|

Period of Performance: July 1, 2022 through June 30, 2023

Statement of Work Purpose: The purpose of this statement of work is to contract with local health to implement mpox (monkeypox) prevention and response activities.

Revision Purpose: N/A

| 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 |
|--|-------------------|---------------------------|-------------------|-------------------------------|-----------------------------|--------------------|--------------------------------|------------------|
| MPOX GAP RESPONSE | 934MPI130 | N/A | 334.04.93 | 07/01/22 | 06/30/23 | 0 | 5,000 | 5,000 |
| | | | | | | 0 | 0 | 0 |
| | | | | | | 0 | 0 | 0 |
| | | | | | | 0 | 0 | 0 |
| | | | | | | 0 | 0 | 0 |
| TOTALS | | | | | | 0 | 5,000 | 5,000 |

| Task # | Activity | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|--------|--|--|---------------------|--|
| 1 | Prevention and Investigations | Develop daily epidemiology reports, data analysis and reporting of vaccine dose allocations/supply, conduct case investigation, develop training materials for case investigations. | 07/01/22 - 06/30/23 | Reimbursement for actual costs incurred, not to exceed total funding consideration amount. |
| 2 | Vaccine Strategy and Delivery, Testing & Treatment-PREVENTION | Vaccine coordination and strategy development, vaccine storage and handling, provide testing and treatment, administration, clinical evaluation of cases and contacts, provide outreach to health systems and independent providers and facilitate education to expand facilities for mpox assessment, testing, track and report on treatment-related disease surveillance data, expand network of enrolled providers who can prescribe and administer vaccines. | | Due date: Every 60 days as specified in the ConCon billing instructions. |

| Task # | Activity | Deliverables/Outcomes | Due Date/Time Frame | Payment Information and/or Amount |
|--------|---|---|---------------------|-----------------------------------|
| 3 | Congregate Settings Mitigation | Provide isolation and quarantine services, develop guidance for use in congregate settings, provide technical assistance and guidance for congregate settings and homeless service providers | | |
| 4 | Communications | Develop a comprehensive communications plan related to immunization rollout and messaging for the public, targeted audiences and the media | | |
| 5 | Health and Medical Area Command-HMAC | Manage and coordinate department emergency response for mpx to include: planning, logistics, medical countermeasures, safety, policy and other operations for the section. | | |
| 6 | Community Engagement | Engage with various community groups to gather feedback on communications mechanisms and promote community vaccine engagement and share public health and safety information, develop targeted advertisements that reach the most at-risk communities, identify priority strategies for outreach and engagement | | |

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.

Program Specific Requirements

Tasks in this statement of work are for reimbursement for the mpx response activities.

EXHIBIT B

COVID-19 Mass Vaccination-FEMA
Essentials for Childhood Early Brain Building with Vroom
Foundational Public Health Services (FPHS)
Infectious Disease Prevention Section (IDPS)
Maternal & Child Health Block Grant
Office of Drinking Water Group A Program
Office of Immunization COVID-19 Vaccine
OSS LMP Implementation
Recreational Shellfish Activities
TB Program
Commercial Tobacco Prevention Program
COVID-19 Refugee & Immigrant Community Health Worker Support
DCHS-ELC COVID-19 Response
Emergency Preparedness, Resilience & Response-PHEP
Injury Violence Prevention Overdose Data to Action
Office of Immunization FSU Vaccine Hesitancy
Office of Immunization Perinatal Hepatitis B
Office of Immunization Promotion of Immunizations to Improve Vaccination Rates
Office of Immunization Regional Representatives
Zoonotic Disease Program-WNV Mosquito Surveillance
Executive Office of Resiliency & Health Security-PHEP
Healthcare-Associated Infections & Antimicrobial Resistance
COVID-19 LHJ Vaccination-ARPA
Monkeypox Prevention & Response