



# Snohomish County Council

## Legislation Details (With Text)

**File #:** 2023-1166      **Version:** 1

**Type:** Motion      **Status:** Approved

**File created:** 9/22/2023      **In control:** General Legislative Session

**On agenda:** 12/6/2023      **Final action:** 12/6/2023

**Title:** Motion 23-421, authorizing the executive to sign agreement for STD/HIV testing and treatment services with Ezzia Healthcare, PLLC

**Sponsors:**

**Indexes:**

**Code sections:** 3.04.140 (5) - Award, execution, by whom

**Attachments:** 1. Motion 23-421, 2. Agreement - SIGNED, 3. Staff Report, 4. Certificate of Insurance, 5. Motion Assignment Slip

Date	Ver.	Action By	Action	Result
12/6/2023	1	General Legislative Session	Approved	Pass
11/28/2023	1	Health and Community Services Committee	Moved to the GLS Consent Agenda	
10/3/2023	1	Administrative Session	Assigned	

### Executive/Council Action Form (ECAF)

**ITEM TITLE:**

Motion 23-421, authorizing the executive to sign agreement for STD/HIV testing and treatment services with Ezzia Healthcare, PLLC

**DEPARTMENT:** Health

**ORIGINATOR:** Sarah de Jong

**EXECUTIVE RECOMMENDATION:** Approved by Lacey Harper 9/25/23

**PURPOSE:** The purpose of this Agreement is for Ezzia Healthcare to provide sexually transmitted infection (STI) testing and treatment services in Snohomish County to Snohomish County residents specifically identified who have been provided a referral voucher from the Health Department.

**BACKGROUND:** Ezzia Healthcare was selected as the winning bidder to an request for proposal that the County published to provide sexually transmitted infection (STI) services in Snohomish County to residents specifically designated by the Health Department. The Health Department will provide vouchers to eligible clients for testing/treatment services at the Ezzia Healthcare clinic. Clients will be instructed to contact Ezzia Healthcare directly for STI testing and treatment services or Health Department staff will assist them in scheduling an appointment with a County Disease Intervention Specialist. The County will indicate on each voucher which tests/treatment should be completed for the Client being referred.

**FISCAL IMPLICATIONS:**

---

EXPEND: FUND, AGY, ORG, ACTY, OBJ, AU	CURRENT YR	2ND YR	1ST 6 YRS
125 5 15 625 4101	\$60,000		
<b>TOTAL</b>			

REVENUE: FUND, AGY, ORG, REV, SOURCE	CURRENT YR	2ND YR	1ST 6 YRS
<b>TOTAL</b>			

**DEPARTMENT FISCAL IMPACT NOTES:**

**CONTRACT INFORMATION:**

ORIGINAL	X	CONTRACT#	6224	AMOUNT	\$60,000
AMENDMENT		CONTRACT#		AMOUNT	

**Contract Period**

ORIGINAL	START	Upon execution	END	12/31/25
AMENDMENT	START		END	

**OTHER DEPARTMENTAL REVIEW/COMMENTS:** Deputy Prosecuting Attorney reviewed and approved. Reviewed/approved by Risk - Shelia Barker 9/22/23 and Finance - Brian Haseleu 9/22/23