



# INTERGOVERNMENTAL AGREEMENT (IGA)

## Amendment

**ARIZONA DEPARTMENT OF  
HEALTH SERVICES  
OFFICE OF PROCUREMENT**

150 N. 18<sup>th</sup> Ave., Suite 530  
Phoenix, Arizona 85007

Contract No.: CTR063847

IGA Amendment No: 4

Procurement Officer:  
**Elizabeth Syms**

### Arizona's Prescription Drug Overdose Prevention Program

It is mutually agreed that the Intergovernmental Agreement referenced is amended as follows:

1. Pursuant to Terms and Conditions, Provision Six (6) Contract Changes, subsection 6.1 Amendments, the Contract is hereby revised with the following:
  - 1.1. The Price Sheet is revised and replaced to reflect the Indirect Rate and Costs decreasing from ten percent (10%) to five percent (5%).
  - 1.2. Exhibit A is revised and replaced.

**ALL CHANGES ARE REFLECTED IN RED**

**All other provisions of this agreement remain unchanged.**

#### Cochise County Health and Social Services

Contractor Name:

**1415 W. Melody Ln., Bldg. A**

Address:

**Bisbee**

**AZ**

**85603**

City

State

Zip

County Authorized Signature

Print Name

Title and Date

Pursuant to A.R.S. § 11-952, the undersigned public agency attorney has determined that this Intergovernmental Agreement is in proper form and is within the powers and authority granted under the laws of Arizona.



2/19/2026

Signature

Date

This Intergovernmental Agreement Amendment shall be effective the date indicated. The Public Agency is hereby cautioned not to commence any billable work or provide any material, service or construction under this IGA until the IGA has been executed by an authorized ADHS signatory.

State of Arizona

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 2025.

Bert Whitehead IV, Deputy Civil County Attorney, Cochise County

Print Name

Procurement Officer

Contract No.: **CTR063847**, which is an Agreement between public agencies, has been reviewed pursuant to A.R.S. § 11-952 by the undersigned Assistant Attorney, who has determined that it is in proper form and is within the powers and authority granted under the laws of the State of Arizona.

Signature

Date

Assistant Attorney General

Print Name



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**PRICE SHEET**

**Cochise County  
State Opioid Response (SOR)  
Cost Reimbursement Line Item Budget  
09/30/2025 – 09/29/2026**

Account Classification	Total Budget
Personnel Services*	\$180,605.00
Employee Related Expenses*	\$54,597.00
Travel*	\$4,500.00
Other Operating*	\$6,497.55
*Indirect Rate and Costs (5%)	\$12,310.00
<b>TOTAL (ANNUAL NOT TO EXCEED)</b>	<b>\$258,509.55</b>

The County is authorized to transfer up to a maximum of ten percent (10%) of the total budget amount between line items with the written approval from an ADHS Program Manager.

Transfers exceeding ten percent (10%) or to a non-funded line item shall require an Agreement Amendment.

\*Indicated indirect rate calculation.



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### Exhibit A – 2 CFR 200.335

[eCFR eExhibit -§ 200.332](#)

**Prime Awardee: Arizona Department of Health Services**  
**UE# QMWUG1AMYF65**  
Requirements for pass-through entities.

Per § 180.300 the awarding agency must check that each subrecipient is not exclude nor disqualified. These checks can be performed in SAM.Gov.ADHS Procurement does these checks and uploads the results into APP or Euna Solutions (eCivis).

#### §180.300

Subrecipient name (which must match the name associated with its unique entity identifier):	<u>Arizona Department of Health Services</u>
Subrecipient's unique entity identifier (UEI #)	<u>QMWUG1AMYF65</u>
Federal Award Identification Number (FAIN, Sometimes it's the same as the Grant Number):	<u>H79TI087838</u>
Federal Award Date:	<u>Contract Date 09/24/2024</u>
Subaward Period of Performance Start and End Date;	<u>09/30/2025-09/29/2026</u>
Subaward Budget Period Start and End Date:	<u>09/30/2025-09/29/2026</u>
Amount of Federal Funds Obligated in the subaward:	<u>\$258,509.55</u>
Total Amount of Federal Funds Obligated to the subrecipient by the pass-through entity including the current financial obligation (how much is available for contracts):	<u>\$1,925,824.00</u>
Federal award project description, as required to be responsive to the Federal Funding Accountability and Transparency Act (FFATA)	<u>Overdose Fatality Reviews and Case Management</u>
Name of Federal awarding agency, pass-through entity, and contact information for awarding official of the Pass-through entity	<u>Substance Abuse &amp; Mental Health Services Administration (SAMHSA)</u>
Assistance Listings number and Title; the pass-through entity must identify the dollar amount made available under each Federal award and the Assistance Listings Number at time of disbursement	<u>93.788</u>
Identification of whether the award is R&D	<u>No</u>
Indirect cost rate for the Federal award (including if the de minimis rate is charged) per § 200.414	<u>5%</u>