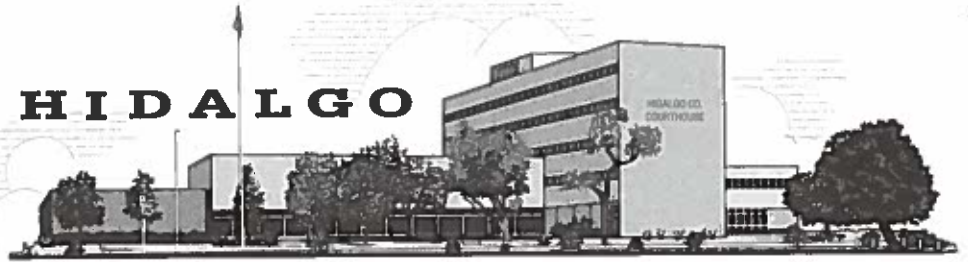


# COUNTY of HIDALGO



EDINBURG, TEXAS 78539

HIDALGO COUNTY AUDITOR'S OFFICE  
Hidalgo County Administration Building  
2808 South Business Highway 281  
Edinburg, Texas 78539-6243  
PHONE: (956) 318-2511  
FAX: (956) 318-2577  
WEBSITE: [www.co.hidalgo.tx.us/auditor](http://www.co.hidalgo.tx.us/auditor)

March 23, 2018

The Honorable Ramon Garcia, Hidalgo County Judge  
The Honorable David Fuentes, Commissioner, Precinct No. 1  
The Honorable Eduardo Cantu, Commissioner, Precinct No. 2  
The Honorable Jose M. Flores, Commissioner, Precinct No. 3  
The Honorable Joseph Palacios, Commissioner, Precinct No. 4

**RE: Certification of Revenue**

Dear Judge and Commissioners:

Pursuant to Local Government Code § 111.0706 SPECIAL BUDGET FOR GRANT OR AID MONEY:

The county auditor shall certify to the commissioner's court the receipt of all public or private grant or aid money that is available for disbursement in a fiscal year but not included in the budget for that fiscal year. On certification, the court shall adopt a special budget for the limited purpose of spending the grant or aid money for its intended purpose.

I, Ray Eufrazio, County Auditor of Hidalgo County, certify to the Hidalgo County Commissioners Court the receipt of an award from the Texas Department of State Health Services (TDSHS). These funds may now be made available by creating a new special budget or amending a current budget for its intended purposes.

Award No. 537-18-0176-00001 Amendment No. 01  
CPS/HAZARDS Public Health Emergency Preparedness (PHEP)

Amount:

\$ 85,000.00	July 1, 2017 - June 30, 2018	2018 All Hazards Conference
\$ 2,500.00	July 1, 2017 - June 30, 2018	NACCHO
<u>\$574,166.00</u>	<u>July 1, 2018 - June 30, 2019</u>	<u>FY19 Hazards</u>
\$661,666.00		

CERTIFIED BY:

*Raymundo Eufrazio*

Raymundo Eufrazio, CPA

*3-26-18*

Date

**HIDALGO COUNTY DISTRICT JUDGES**

LUIS M. SINGLETERRY  
JUDGE, 92<sup>ND</sup> D.C.

RODOLFO DELGADO  
JUDGE, 89<sup>TH</sup> D.C.

J. R. "BOBBY" FLORES  
JUDGE, 139<sup>TH</sup> D.C.

ROSE GUERRA REYNA  
JUDGE, 206<sup>TH</sup> D.C.

JUAN R. PARTIDA  
JUDGE, 175<sup>TH</sup> D.C.

MARIO E. RAMIREZ, JR.  
JUDGE, 332<sup>ND</sup> D.C.

NOE GONZALEZ  
JUDGE, 379<sup>TH</sup> D.C.  
OVERSEER

LETICIA LOPEZ  
JUDGE, 349<sup>TH</sup> D.C.

L. KENO VASQUEZ  
JUDGE, 308<sup>TH</sup> D.C.

ISRAEL RAMON, JR.  
JUDGE, 430<sup>TH</sup> D.C.

RENEE R. BETANCOURT  
JUDGE, 449<sup>TH</sup> D.C.

## Minerva Diaz

---

**From:** Mike Escaname [miguel.escaname@hchd.org]  
**Sent:** Friday, March 23, 2018 3:25 PM  
**To:** minerva.diaz@auditor.co.hidalgo.tx.us  
**Cc:** Deborah Fischer  
**Subject:** Request for Certification of Revenue - CPS/HAZARDS FY 18 Amendment & PHEP FY 19 Award  
**Attachments:** Amendment No 01.pdf; AI- Approval to Accept the Amendment No 1 032718.pdf

Minerva,

I'd appreciate if you can arrange to have a Certification of Revenue prepared for the following monies:

FY 18 \$85,000.00  
FY 18 \$ 2,500.00  
FY 19 \$574,166.00

See attached grant contract Amendment for the CPS/HAZARDS (PHEP) program.

We will present agenda item #64252 to Commissioner's Court for acceptance next Tuesday, 03/27/2018.

Thanks,

*Mike Escaname*

Chief Financial Officer  
Hidalgo County Health & Human Services Department  
1304 S. 25<sup>th</sup> Ave  
Edinburg, TX 78542-7205  
Main Line (956) 383-6221  
Direct Line (956) 292-7000 ext. 7210

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AI-64252  
CC - REGULAR

Health & Human Services Dept. 19. 0.  
Other

Meeting Date: 03/27/2018

Submitted For: Eddie Olivarez, HEALTH & HUMAN SERVICES DEPT.

Submitted By: Mike Escaname, HEALTH & HUMAN SERVICES DEPT.

Department: HEALTH & HUMAN SERVICES DEPT.

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Information

CAPTION

1. Requesting approval to accept the Public Health Emergency Preparedness grant contract Amendment No. 537-18-0176-00001 No. 01. This amendment will add \$661,666.00. \$661,666.00 is allocated for the FY 18 contract budget period July 1, 2017 through June 30, 2018. \$574,166.00 is allocated for the FY 19 contract budget period of July 1, 2018 through June 30, 2019.

2. Requesting approval for County Judge to e-sign the PHEP contract Amendment and related contract documents.

3. Requesting approval of the Certification of Revenue in the amount of \$661,666.00.

4. Requesting approval of the budget appropriation in the amount of \$85,000.00 from state funds and \$8,500.00 in local match funds.

5. Requesting approval of the budget appropriation in the amount of \$2,500.00 in state funds.

BACKGROUND

03/07/17 - AI-58817 - Approval to accept the FY 18 PHEP grant contract.

01/30/18 - AI-63409 - Approval to submit request for additional funds.

01/30/18 - AI-63418 - Approval to submit renewal grant application for the PHEP FY 19 grant.

Budget Appropriation of the FY 19 PHEP award in the amount of \$574,166.00 in state funds will be appropriated at a next Commissioner's Court meeting.

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Fiscal Impact

CALENDAR YEAR: 2018

ACCT. #: 8-1293-441-00-340-013-8-XXX

FUNDS AVAILABLE Y/N?: Y

MATCHING FUNDS Y/N?: Y

BUDGETARY IMPACT:

Local match of \$8,500.00 for the grant award of \$85,000.00 has previously been reserved and appropriated. (The \$2,500.00 do not require local match)

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Attachments

Grant Contract Amendment

Budget Appropriation

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**Form Review**

**Inbox**

**Reviewed By**

**Date**

Budget & Management

Final Approval

Form Started By: Mike Escaname

Started On: 03/23/2018 01:49 PM

DATE: March 27, 2018

DEPARTMENT HEAD: Eddie Olivarez

DEPARTMENT NAME: Health & Human Services

ACCOUNT NUMBER: 8-1293-441-00-340-013-8-XXX

Contact Person: Mike Escaname Ph#: (956) 292-7000 ext. 7210

**2018**  
Appropriation  
A1-64252



SUBJECT: **Budget Amendments (increase (decrease))** in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Budget Amendments (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

INCREASE ACCOUNT NUMBER(S)		ACCOUNT (OBJECT) NAME		AMOUNT
8-1293-441-00-340-013-8-	320	CPS/HAZARDS	PROFESSIONAL SERVICES	93,500.00
8-1293-441-00-340-013-8-	890	CPS/HAZARDS	OTHER	2,500.00
8-1293-331-12-340-013-8-	000	CPS/HAZARDS REVENUE		87,500.00
8-1293-391-01-013-100-8-	000	TRANSFERS IN - GENERAL FUND	(DO NOT POST)	8,500.00
8-1100-491-01-013-293-8-891		TRANSFER OUT - HEALTH GRANTS	(DO NOT POST)	8,500.00
<b>TOTAL BUDGET INCREASE (DECREASE)</b>				<b>96,000.00</b>

REASON: Appropriation of Amendment funds for the PHEP FY 18 grant budget period.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNTY CLERK

# DUPLICATE

JE176177  
#5537

DATE: January 30, 2018

DEPARTMENT HEAD: Sergio Cruz, Budget Officer

2017

Interdepartmental Transfer

DEPARTMENT NAME: DBM for CPS/Hazards Grant

AI #63467/CC 1-30-18

U.A.



ACCOUNT NUMBER: 7-1XXX-X91-01-0XX-XXX-8-XXX

CONTACT PERSON: Ivan Cantu, Budget Analyst III PHONE: ext 5425

SUBJECT: Interdepartmental Transfer/s in Accordance with Local Government Code Chapter 111, Subchapter C.

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Interdepartmental transfer/s (transfer in/out) (increase/decrease) in accordance with Local Government Code, Chapter 111, Subchapter C.

*[Handwritten signature]* 01/30/18

INCREASE/DECREASE ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
<b>FROM:</b>		
7-1100-491-01-047-293-8 891	Transfers Out-Health Grants- Program #047	(8,500.00) ✓
7-1293-391-01-047-100-8- 000	Transfers In-General Fund- Program #047	(8,500.00) ✓
<b>TO:</b>		
7-1100-491-01-013-293-8- 891	Transfers Out-Health Grants- Program #013	8,500.00 ✓
7-1293-391-01-013-100-8- 000	Transfers In-General Fund- Program #013	8,500.00 ✓
<b>TOTAL BUDGET INCREASE (DECREASE)</b>		<b>-</b> ✓

REASON: To fund the cash match portion for the CPS/Hazards grant, program #013 for fiscal year 2018, pending year-end grant carryovers (refer to AI #63409, CC 1-30-17).

DEPARTMENT HEAD SIGNATURE

COMMISSIONERS COURT

DATE

ATTEST, COUNTY CLERK

APPROVED BY  
COMMISSIONERS' COURT

ON: 1-30-18 *[Handwritten initials]*

Account Number	Grant Title	Federal/State Agency Award 2017-2018	Local Match	Total Grant Award	Note
1295-423-00-330-016-8-	Donna ISD	113,760.00		113,760.00	2
1295-423-00-330-017-8-	La Joya ISD	10,000.00		10,000.00	2
1295-423-00-330-019-7-	McAllen ISD	60,000.00		60,000.00	2
1295-423-00-330-020-8-	PSJA ISD	62,658.00		62,658.00	2
1295-423-00-330-021-8-	Sharyland ISD	4,740.00		4,740.00	2
1295-423-00-330-023-8-	Edinburg ISD	42,000.00		42,000.00	2
1295-423-00-330-024-8-	Edcouch Elsa ISD	14,200.00		14,200.00	2
1295-423-00-330-025-8-	Mission ISD	20,000.00		20,000.00	2
1295-423-00-330-027-8-	JJAEP-Discretionary	Reimbursement		Reimbursement	2
1295-423-00-330-039-8-	Monte Alto ISD	2,150.00		2,150.00	2
1295-423-00-330-040-8-	Hidalgo ISD	23,650.00		23,650.00	2
1295-423-00-330-041-8-	Mercedes ISD	62,920.00		62,920.00	2
1295-423-00-330-043-8-	Valley View ISD	10,320.00		10,320.00	2
1296-423-00-330-031-8-	Juvenile Probation - Title IV-E Enhanced Adm FY16	Reimbursement		Reimbursement	2
1297-423-00-320-002-8-	Adult Probation-Judicial FY18 Basic Supervision	9,628,328.00		9,628,328.00	2
1297-423-00-320-006-8-	Adult Probation-Judicial FY18 Mentally Impaired	138,772.00		138,772.00	2
1297-423-00-320-009-8-	Adult Probation-Judicial FY18 Treatment Alternative (TAIP)	120,569.00		120,569.00	2
1297-423-00-320-012-8-	Adult Probation-Judicial FY18 SAFFP	45,000.00		45,000.00	2
1297-423-00-320-014-8-	Adult Probation-Judicial FY18 Drug Court	216,775.00		216,775.00	2
1297-423-00-320-015-8-	Adult Probation-Judicial FY18 Sex Offender Caseload	197,953.00		197,953.00	2
1297-423-00-320-020-8-	Adult Probation-Judicial FY18 Substance Abuse Treatment Facility	1,592,024.00		1,541,716.46	2
1297-423-00-320-035-8-	Adult Probation-Judicial FY18 AFTERCARE	93,585.00		93,585.00	2
1297-423-00-320-039-8-	Adult Probation-Judicial FY18 Community Corrections (HRP)	105,926.00		105,926.00	2
1297-423-00-320-040-8-	Adult Probation-Judicial FY18 Community Corrections (RRP)	286,241.00		286,241.00	2
1297-423-00-320-041-8-	Adult Probation-Judicial FY18 Community Corrections (Employment)	1,050,952.00		1,050,952.00	2
1297-423-00-320-045-8-	Adult Probation-Judicial FY18 Assessment Unit	283,500.00		283,500.00	2
1312-431-00-12X-XXX-0-	Colonia Access Program RIII	1,547,275.46		1,547,275.46	1
	Total Grants	43,300,265.99	552,958.85	43,853,224.84	

Note:

- 1 - Grant has been applied for and has been approved.
- 2 - Grant has been applied for and is pending grantor approval.
- 3 - Grant amount was estimated based on prior years awards.
- 4 - Fund 1289 RSAT grant is matched from Fund 1297 State funding for SATF
- 5 - Fiscal Year 19 Local Match is estimated as follows:

1285-421-00-293-005-9-	104,153.85
1293-441-00-340-008-9-	121,112.00
1293-441-00-340-011-9-	87,554.00
1293-441-00-340-013-9-	57,417.00
1293-441-10-340-013-9	8,026.00
1293-441-00-340-047-9-	10,000.00
<b>Total Fiscal Year 17</b>	<b>388,262.85</b>

**DEPARTMENT OF STATE HEALTH SERVICES CONTRACT NO. 537-18-0176-00001  
AMENDMENT NO. 01**

**THE DEPARTMENT OF STATE HEALTH SERVICES (“DSHS”) and HIDALGO COUNTY (“Contractor”), collectively referred to as the “Parties” or singularly as the “Party” herein, to that certain grant contract to provide funding for activities in support of the Public Health Emergency Preparedness (“PHEP”) Cooperative Agreement from the Centers for Disease Control and Prevention (“CDC”) effective July 1, 2017, and denominated System Agency Contract No. 537-18-0176-00001 (“Contract”), now desire to amend the Contract.**

**WHEREAS, the Parties wish to extend the term of the Contract to allow continued support of these Projects; and**

**WHEREAS, the Parties acknowledge that the furtherance of the Project will require additional funds; and**

**WHEREAS, the Parties wish to update the requirements for receiving funding under the existing Hazards activities; and**

**WHEREAS, the Parties wish to add activities under the existing Hazards Contract and to add new activities for FY19.**

**NOW, THEREFORE, the Parties hereby amend and modify the Contract as follows:**

- 1. SECTION II of the Signature Document, DURATION, is hereby amended to reflect a termination date of June 30, 2019.**
- 2. SECTION III of the Signature Document, BUDGET, is amended to add SIX HUNDRED SIXTY-ONE THOUSAND SIX HUNDRED SIXTY-SIX DOLLARS (\$661,666.00), for a total Contract amount not to exceed ONE MILLION TWO HUNDRED THIRTY-FIVE THOUSAND EIGHT HUNDRED THIRTY-TWO DOLLARS (\$1,235,832.00). Contractor is allocated SIX HUNDRED SIXTY-ONE THOUSAND SIX HUNDRED SIXTY-SIX DOLLARS (\$661,666.00) for FY18 Contract budget period July 1, 2017, through June 30, 2018. Contractor is allocated FIVE HUNDRED SEVENTY-FOUR THOUSAND ONE HUNDRED SIXTY-SIX DOLLARS (\$574,166.00) for FY19 Contract budget period of July 1, 2018, through June 30, 2019. Funds provided in support of one Contract activity may only be used for that activity and may not be comingled with other funds provided under this Contract.**

**Funding for this Contract is dependent on State Appropriations and Federal Grant funds. No work may begin and no charges may be incurred until the System Agency issues a written Notice to Proceed to Grantee. This Notice to Proceed may include an Amended or Ratified Budget which will be incorporated into this Contract by a subsequent Amendment, as necessary.**

3. **SECTION V** of the Signature Document, **LEGAL NOTICES**, is amended to replace the System Agency information in its entirety as follows:

Department of State Health Services  
 Attention: General Counsel  
 1100 W. 49<sup>th</sup> Street, MC 1911  
 Austin, TX 78756

4. **SECTION VI** of the Signature Document, **ADDITIONAL GRANT INFORMATION**, is amended to replace in its entirety as follows:

Federal Award Identification Number (FAIN): 1 NU90TP921879-01-00  
 Federal Award Date: July 1, 2017  
 Name of Federal Awarding Agency: Centers for Disease Control and Prevention  
 CFDA Name and Number: Federal, 93.074  
 Awarding Official Contact Information:  
 Stephany Vento  
 1600 Clifton Road, MS D29  
 DSLR  
 Atlanta, GA 30329  
 Phone: 404-960-9023  
 DUNS: 103110834

In accordance with 2 CFR 200.331(A), if any of the above information is not available at time of Contract execution, then it will be provided to the Grantee by a Technical Guidance Letter.

5. **ATTACHMENT A, STATEMENT OF WORK**, is amended to replace in its entirety with **ATTACHMENT A.1**, and is effective upon execution of this amendment through June 30, 2018.
6. The Parties agree to add **EIGHTY-FIVE THOUSAND DOLLARS (\$85,000.00)** to the Other Category of the existing Hazards Contract Budget to provide funding to Contractor for costs related to support of the 2018 All Hazards Conference in March of 2018. The Parties also agree to add **TWO THOUSAND FIVE HUNDRED DOLLARS (\$2,500)** to the Other Category of the existing Contract Budget, to provide funding to Contractor for costs of the NACCHO application fees. Funds provided in support of one Contract activity may only be used for that activity and may not be comingled with other funds provided under this Contract. Accordingly, the Parties agree to revise the Budget Summary effective upon execution and ending June 30, 2018, as follows:

Budget Categories	FY18 HAZARDS Budget Summary	2018 All Hazards Conference Budget Summary	NACCHO Budget Summary	Total Contract Budget through 6/30/2018
Personnel	\$445,562.00	\$0.00	\$0.00	\$445,562.00
Fringe Benefits	\$162,630.00	\$0.00	\$0.00	\$162,630.00
Travel	\$6,797.00	\$0.00	\$0.00	\$6,797.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00

Supplies	\$15,994.00	\$0.00	\$0.00	\$15,994.00
Contractual	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$600.00	\$93,500.00	\$2,500.00	\$96,600.00
Sum of Direct Costs	\$631,583.00	\$93,500.00	\$2,500.00	\$727,583.00
Indirect Costs	\$0.00	\$0.00	\$0.00	\$0.00
Sum of Total Direct Costs and Indirect Costs	\$631,583.00	\$93,500.00	\$2,500.00	\$727,583.00
Less Match (Cash or In-Kind)	\$57,417.00	\$8,500.00	\$0.00	\$65,917.00
<b>TOTAL</b>	<b>\$574,166.00</b>	<b>\$85,000.00</b>	<b>\$2,500.00</b>	<b>\$661,666.00</b>

Grantee shall provide matching funds in the amount of SIXTY-FIVE THOUSAND NINE HUNDRED SEVENTEEN DOLLARS (\$65,917.00).

7. ATTACHMENT A.1, STATEMENT OF WORK, will be replaced, in its entirety, with ATTACHMENT A.2, effective July 1, 2018, through June 30, 2019.
8. For the Contract period beginning July 1, 2018, and ending June 30, 2019, the Categorical Budget is deleted in its entirety and replaced with the following:

Budget Categories	FY19 HAZARDS Budget Summary (7/1/18 – 6/30/19)
Personnel	\$437,256.00
Fringe Benefits	\$166,245.00
Travel	\$9,851.00
Equipment	\$0.00
Supplies	\$4,263.00
Contractual	\$0.00
Other	\$13,968.00
Sum of Direct Costs	\$631,583.00
Indirect Costs	\$0.00
Sum of Total Direct Costs and Indirect Costs	\$631,583.00
Less Match (Cash or In-Kind)	\$57,417.00
<b>TOTAL</b>	<b>\$574,166.00</b>

Grantee shall provide matching funds in the amount of FIFTY-SEVEN THOUSAND FOUR HUNDRED SEVENTEEN DOLLARS (\$57,417.00).

9. This Amendment No. 01 shall be effective on the first date on which it has been executed by both Parties.
10. Except as amended and modified by this Amendment No. 01, all terms and conditions of the Contract shall remain in full force and effect.
11. Any further revisions to the Contract shall be by written agreement of the Parties.

SIGNATURE PAGE FOLLOWS

**SIGNATURE PAGE FOR AMENDMENT NO. 01  
SYSTEM AGENCY CONTRACT NO. 537-18-0176-00001**

**TEXAS DEPARTMENT OF STATE HEALTH  
SERVICES**

**HIDALGO COUNTY**

\_\_\_\_\_

By: \_\_\_\_\_

Charles Smith

Name: \_\_\_\_\_

Executive Commissioner  
Health and Human Services Commission

Title: \_\_\_\_\_

Date of Execution: \_\_\_\_\_

Date of Execution: \_\_\_\_\_

**THE FOLLOWING ATTACHMENTS ARE ATTACHED AND INCORPORATED AS PART OF THE  
CONTRACT:**

**ATTACHMENT A.1 - FY18 CONTRACT STATEMENT OF WORK (CONTRACT TERM: JULY  
1, 2017 – JUNE 30, 2018)**

**ATTACHMENT A.2 - FY19 CONTRACT STATEMENT OF WORK (CONTRACT TERM: JULY  
1, 2018 – JUNE 30, 2019)**

**ATTACHMENT B - BUDGET**

**ATTACHMENT C - FFATA**

**ATTACHMENT A.1**  
**STATEMENT OF WORK**  
Upon Execution through July 30, 2018

**I. GRANTEE RESPONSIBILITIES**

Grantee will:

- A. Perform activities in support of the PHEP Cooperative Agreement from the Centers for Disease Control and Prevention (CDC) to align PHEP and Hospital Preparedness Programs (HPP) and advance public health and healthcare preparedness.
- B. Perform the activities required under this Contract in the following county: Hidalgo County.
- C. Provide System Agency with situational awareness data generated through interoperable networks of electronic data systems.
- D. Address the following public health preparedness capabilities:
  1. Capability 1 – Community Preparedness is the ability of communities to prepare for, withstand, and recover – in both the short and long terms – from public health incidents.
  2. Capability 2 – Community Recovery is the ability to collaborate with community partners (e.g., healthcare organizations, business, education, and emergency management) to plan and advocate for the rebuilding of public health, medical, and mental/behavioral health systems to at least a level of functioning comparable to pre-incident levels and improved levels where possible.
  3. Capability 3 – Emergency Operations Center Coordination is the ability to direct and support an event or incident with public health or medical implications by establishing a standardized, scalable system of oversight, organization, and supervision consistent with jurisdictional standards and practices with the National Incident Management System.
  4. Capability 4 – Emergency Public Information and Warning is the ability to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management responders.
  5. Capability 5 – Fatality Management is the ability to coordinate with other organizations (e.g., law enforcement, healthcare, emergency management, and medical examiner/coroner) to ensure the proper recovery, handling, identification, transportation, tracking, storage, and disposal of human remains and personal effects; certify cause of death; and facilitate access to mental/behavioral health services to the family members, responders, and survivors of an incident.
  6. Capability 6 – Information Sharing is the ability to conduct multijurisdictional, multidisciplinary exchange of health-related information and situational awareness data among federal, state, local, territorial, and tribal levels of government, and the private sector. This capability includes the routine sharing of information as well as

**ATTACHMENT A.1**  
**STATEMENT OF WORK**  
Upon Execution through July 30, 2018

issuing of public health alerts to federal, state, local, territorial, and tribal levels of government and the private sector in preparation for and in response to events or incidents of public health significance.

7. **Capability 7 – Mass Care** is the ability to coordinate with partner agencies to address the public health, medical, and mental/behavioral health needs of those impacted by an incident at a congregate location. This capability includes the coordination of ongoing surveillance and assessment to ensure that local health needs continue to be met as the incident evolves.
8. **Capability 8 – Medical Countermeasure Dispensing** is the ability to provide medical countermeasures (including vaccines, antiviral drugs, antibiotics, antitoxin, etc.) in support of treatment or prophylaxis (oral or vaccination) to the identified population in accordance with public health guidelines and/or recommendations.
9. **Capability 9 – Medical Materiel Management and Distribution** is the ability to acquire, maintain (e.g., cold chain storage or other storage protocol), transport, distribute, and track medical materiel (e.g., pharmaceuticals, gloves, masks, and ventilators) during an incident and to recover and account for unused medical materiel, as necessary, after an incident.
10. **Capability 10 – Medical Surge** is the ability to provide adequate medical evaluation and care during events that exceed the limits of the normal medical infrastructure of an affected community. It encompasses the ability of the healthcare system to survive a hazard impact and maintain or rapidly recover operations that were compromised.
11. **Capability 11 – Non-Pharmaceutical Interventions** is the ability to recommend to the applicable lead agency (if not public health) and implement, if applicable, strategies for disease, injury, and exposure control. Strategies include the following: isolation and quarantine; restrictions on movement and travel advisory/warnings; social distancing; external decontamination; hygiene; and precautionary behaviors.
12. **Capability 12 – Public Health Laboratory Testing** is the ability to conduct rapid and conventional detection, characterization, confirmatory testing, data reporting, investigative support, and laboratory networking to address actual or potential exposure to all-hazards. Hazards include chemical, radiological, and biological, and biological agents in multiple matrices that may include clinical samples, food, and environmental samples (e.g., water, air, and soil). This capability supports routine surveillance, including pre-event incident and post-exposure activities.
13. **Capability 13 – Public Health Surveillance and Epidemiological Investigations** is the ability to create, maintain, support, and strengthen routine surveillance and detection systems and epidemiological investigation processes, as well as to expand these systems and processes in response to incidents of public health significance.
14. **Capability 14 – Responder Safety and Health** describes the ability to protect public

**ATTACHMENT A.1**  
**STATEMENT OF WORK**  
Upon Execution through July 30, 2018

health agency staff responding to an incident and the ability to support the health and safety needs of hospital and medical facility personnel, if requested.

15. Capability 15 – Volunteer Management is the ability to coordinate the identification, recruitment, registration, credential verification, training, and engagement of volunteers to support the jurisdictional public health agency's response to incidents of public health significance.

- E. Match funds awarded under this Contract with costs or third-party contributions that are not paid by the federal government under another award, except where authorized by federal statute to be used for cost sharing or matching. The non-federal contributions (match) may be provided directly or through donations from public or private entities and may be in cash or in-kind donations, fairly evaluated, including plant, equipment, or services. The costs that the Grantee incurs in fulfilling the matching or cost-sharing requirement are subject to the same requirements, including the cost principles, that are applicable to the use of Federal funds, including prior approval requirements and other rules for allowable costs as described in 45 CFR 74.23 and 45 CFR 92.24, as amended.

Grantee will provide matching in the amount of at least ten percent (10%) of the allocation amount. Cash match is defined as an expenditure of cash by the Grantee on allowable costs of this Contract that are borne by the Grantee. In-kind match is defined as the dollar value of non-cash contributions by a third party given in goods, commodities, or services that are used in activities that benefit this Contract's project and that are contributed by non-federal third parties without charge to the Grantee. The criteria for match must:

1. Be an allowable cost under the applicable federal cost principle;
2. Be necessary and reasonable for the efficient accomplishment of project or program objectives;
3. Be verifiable within the Grantee's (or subcontractor's) records;
4. Be documented, including methods and sources, in the approved budget (applies only to cost reimbursement contracts);
5. Not be included as contributions toward any other federally-assisted project or program (match can count only once);
6. Not be paid by the federal government under another award, except where authorized by federal statute to be used for cost sharing or match;
7. Conform to other provisions of governing circulars/statutes/regulations as applicable for the Contract;
8. Be adequately documented;
9. Follow procedures for generally accepted accounting practices as well as meet audit requirements; and
10. Value the in-kind contributions reported and must be supported by documentation

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reflecting the use of goods and/or services during the Contract term.

- F. In the event of a public health emergency involving a portion of the state, mobilize and dispatch staff or equipment purchased with funds from previous PHEP cooperative agreements and not currently performing critical duties in the jurisdiction served, to the affected area of the state upon receipt of a written request from System Agency.
- G. Inform System Agency in writing if Grantee will not continue performance under this Contract within 30 days of receipt of an amended standard(s) or guideline(s). System Agency may terminate this Contract immediately or within a reasonable period of time as determined by System Agency.
- H. Develop, implement and maintain a timekeeping system for accurately documenting staff time and salary expenditures for all staff funded through this Contract, including partial full-time employees and temporary staff.
- I. Complete and submit programmatic reports as directed by System Agency in a format specified by System Agency. Due dates will be listed in the most current System Agency reporting schedule, to be released within thirty (30) days of the Contract start date. Grantee will provide System Agency other reports, including financial reports, that System Agency determines necessary to accomplish the objectives of this Contract and to monitor compliance.
- J. Submit Performance Measures to System Agency within an established timeframe designated by System Agency as required by the CDC.
- K. Submit the work plan that encompasses the Contract term, due to System Agency within an established timeline designated by System Agency.
- L. Conduct, or participate in, an annual Training and Exercise Planning Workshop (TEPW) with all applicable agencies in accordance with Homeland Security Exercise and Evaluation Program (HSEEP) guidelines to develop a strategy and structure for a multi-year Training and Exercise Plan (TEP). Prepare, maintain, and upon request, submit a copy of the TEPW agenda and participant roster as documentation of TEPW attendance.
- M. Submit a current Multi-Year Training & Exercise Plan that covers FY18 through FY23 (July 1, 2017, through June 30, 2022) to System Agency within an established timeframe designated by System Agency, using the template provided by System Agency.

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- N. Conduct, or participate in, at least one annual Preparedness Exercise consistent with their TEP. Submit a Notification of Exercise (NOE) form to the System Agency Preparedness Exercise inbox at [preparednessexercise@dshs.texas.gov](mailto:preparednessexercise@dshs.texas.gov) no later than sixty (60) days prior to the start of the exercise.
- O. Submit at least one (1) After Action Review/Improvement Plan (AAR/IP). All AAR/IPs must be submitted to the System Agency Preparedness Exercise inbox, [preparednessexercise@dshs.texas.gov](mailto:preparednessexercise@dshs.texas.gov) within sixty (60) days of the completion of the exercise to System Agency Exercise Team and no later than June 30, 2018. AAR/IPs must be completed in accordance with the System Agency Exercise Guide.
- P. Complete and submit the Operational Readiness Review (ORR) and all supporting documents provided by System Agency to System Agency SNS SharePoint twenty (20) business days prior to review.
1. Provide updated Point of Dispensing (POD) standards data for submission to System Agency SNS SharePoint by April 1, 2018;
  2. Perform and submit metrics on each of the three (3) SNS operation drills (at pre-identified POD locations and existing call down rosters) and submit After Action Reviews/Improvements sixty (60) days after completion of the drill or by April 1, 2018, to the [preparednessexercise@dshs.texas.gov](mailto:preparednessexercise@dshs.texas.gov) inbox. Acceptable drills include:
    - a. Staff Call Down;
    - b. Facility Set-up; and
    - c. POD Activation.
- Q. Submit the Mid-Year Report due to System Agency within an established timeframe designated by System Agency.
- R. Complete an End-Of-Year Performance Report in a format specified by System Agency no later than August 15, 2018.
- S. Designate a member of the PHEP program to attend, in person, three (3) PHEP quarterly meetings during the Contract term. If the designee is unable to attend any of the meetings in person, the Grantee must notify System Agency in writing as to the reason for non-compliance.
- T. Designate a member of the PHEP program to attend, in person, four regional healthcare coalition meetings during the term of the Contract from July 1, 2017, to June 30, 2018.

**ATTACHMENT A.1**  
**STATEMENT OF WORK**  
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Submit sign-in sheets from meetings as evidence of attendance.

- U. Immediately notify System Agency in writing if Grantee is legally prohibited from providing any report under this Contract.
- V. Use the Texas Disaster Volunteer Registry (TDVR), which is Texas' version of the Emergency System for the Advanced Registration of Volunteer Health Professionals (ESAR-VHP) as their main volunteer management tool, if utilizing Medical Reserve Corps or other volunteer groups. If Grantee uses volunteers as provided in the Section, the Grantee must either:
1. Request access to the TDVR from the State ESAR-VHP System Administrator, enter all volunteer data into the system using the Intermedix Data Input Form, and submit the form to the State ESAR-VHP System Administrator; or
  2. Petition System Agency in writing for an exemption from using the TDVR. Successful petitioners must be currently using a fully operational, ESAR-VHP-compliant, web-based volunteer management system. If petitioning System Agency to use a fully operational, ESAR-VHP-compliant, web-based volunteer management system, then the substitute system must meet, but is not limited to, the following federal requirements:
    - a. Must offer Internet-based registration;
    - b. Volunteer information is collected and maintained in a manner consistent with all federal, state and local laws governing security and confidentiality;
    - c. Must be able to register and collect the credentials and qualifications of health professionals that are then verified with the issuing entity or appropriate authority;
    - d. Must be able to verify the credentials of the 20 mandated professions;
    - e. Must be able to assign to one of four emergency credential levels;
    - f. Must be able to identify volunteers willing to participate in a federally coordinated emergency response;
    - g. Must be able to re-verify professional credentials every 6 months;
    - h. Must have the ability to include the differing scope of work information for each of the 20 mandated professions;
    - i. Must be able to record all volunteer health professional affiliations; and
    - j. Must be able to verify that all volunteers across all credential levels not be included on the U.S. Department of Health and Human Services, Office of the Inspector General's List of Excluded Individuals/Entities (LEIE).
    - k. Additionally, the fully operational, ESAR-VHP-compliant, web-based volunteer management system must be able to register, collect, and verify the

**ATTACHMENT A.1**  
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credentials and qualifications of the health professionals entered into the system.

- W. Grantee may not use funds for research, clinical care, fund-raising activities or lobbying, construction or major renovations, reimbursement of pre-award costs, to supplant existing state or federal funds for activities, payment or reimbursement of backfilling costs for staff, purchase of vehicles of any kind, or funding an award to another party or provider who is ineligible.
- X. Cooperate with System Agency to coordinate all planning, training and exercises performed under this Contract with local emergency management and the Texas Division of Emergency Management (TDEM) District Coordinators assigned to the Grantee's sub-state region, to ensure consistency and coordination of requirements at the local level and eliminate duplication of effort between the various domestic preparedness funding sources in the state.
- Y. Coordinate all risk communication activities with the System Agency Communications Unit by using System Agency's core messages posted on the System Agency website, and submitting copies of draft risk communication materials to System Agency for coordination prior to dissemination.
- Z. Initiate the purchase of approved equipment no later than June 30, 2018, as documented by issue of a purchase order or written order confirmation from the vendor on or before June 30, 2018. In addition, all equipment and supplies must be received not later than 45 calendar days following the end of the Contract term.
- AA. Comply with all applicable federal and state laws, rules, and regulations including, but not limited to, the following:
  - 1. Public Law 107-188, Public Health Security and Bioterrorism Preparedness and Response Act of 2002;
  - 2. Public Law 113-05, Pandemic and All-Hazards Preparedness Reauthorization Act; and
  - 3. Texas Health and Safety Code Chapter 81.
- BB. Comply with all applicable regulations, standards and guidelines in effect on the beginning date of the Term of this Contract.
- CC. Submit a current Texas Preparedness and Evaluation Process (TxPEP) report to System Agency within an established timeframe designated by System Agency, using the template

**ATTACHMENT A.1**  
**STATEMENT OF WORK**  
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provided by System Agency.

- DD. Submit a report on the Jurisdiction's vulnerable population outreach activities to System Agency within an established timeframe designated by System Agency, using a template provided by System Agency.
- EE. Work with the Regional Health Care Coalition to develop comprehensive preparedness strategies. Plans will be submitted to DSHS by the Health Care Coalition.

**II. PERFORMANCE MEASURES**

System Agency will monitor the Grantee's performance of the requirements and compliance with the Contract's terms and conditions. Grantee must demonstrate adherence to PHEP reporting deadlines and the capability to receive, stage, store, distribute, and dispense materiel during a public health emergency. Failure to meet these requirements may result in withholding a portion of the current PHEP base awards.

The initial reporting requirement schedule for the requirements is subject to change as System Agency and CDC may modify requirements and due dates. System Agency will send Grantee a requirements schedule within thirty (30) days of the Contract start date.

**III. INVOICE AND PAYMENT**

- A. Grantee will request payment using the State of Texas Purchase Voucher (Form B-13) on a monthly basis and acceptable supporting documentation for reimbursement of the required services/deliverables. Additionally, the Grantee will submit the Financial Status Report (FSR-269A) and the Match Certification Form (B-13A). Vouchers, supporting documentation, Financial Status Reports, and Match Certification Forms should be mailed or emailed to the addresses below.
- B. The Parties agree to cooperate by submitting separate and distinct invoices for each of the three Contract Grant Funding Allocations. Separate monthly invoices will be submitted for the base Hazards Grant Activities and for the 2018 All Hazards Conference Grant Activities. In addition, a separate one-time invoice will be submitted for the NACCHO application process. Comingling of these federal funds is prohibited.

**ATTACHMENT A.1**  
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Department of State Health Services  
Claims Processing Unit, MC 1940  
1100 West 49th Street  
P.O. Box 149347  
Austin, TX 78714-9347  
FAX: (512) 458-7442  
EMAIL: [invoices@dshs.texas.gov](mailto:invoices@dshs.texas.gov), [Php.vouchersupport@dshs.texas.gov](mailto:Php.vouchersupport@dshs.texas.gov) &  
[CMSInvoices@dshs.texas.gov](mailto:CMSInvoices@dshs.texas.gov)

B-13, B-13A, and supporting documentation should be sent to: [invoices@dshs.texas.gov](mailto:invoices@dshs.texas.gov),  
[Php.vouchersupport@dshs.texas.gov](mailto:Php.vouchersupport@dshs.texas.gov) & [CMSInvoices@dshs.texas.gov](mailto:CMSInvoices@dshs.texas.gov)

FSRs should be sent to: [invoices@dshs.texas.gov](mailto:invoices@dshs.texas.gov), [Php.vouchersupport@dshs.texas.gov](mailto:Php.vouchersupport@dshs.texas.gov),  
[FSRGrants@dshs.texas.gov](mailto:FSRGrants@dshs.texas.gov) & [CMSInvoices@dshs.texas.gov](mailto:CMSInvoices@dshs.texas.gov)

- C. Grantee will be paid on a monthly basis and in accordance with **Attachment B, Budget**.
- D. System Agency reserves the right, where allowed by legal authority, to redirect funds in the event of financial shortfalls. System Agency will monitor Grantee's expenditures on a quarterly basis. If expenditures are below that projected in Grantee's total Contract amount, Grantee's budget may be subject to a decrease for the remainder of the Term of the Contract. Vacant positions existing after ninety days may result in a decrease in funds.

Grantee may request a one-time working capital advance not to exceed 12% of the total amount of the Contract funded by DSHS. All advances must be expended by the end of the Contract term. Advances not expended by the end of the Contract term must be refunded to DSHS.

- E. Grantee will repay all or part of advance funds at any time during the Contract's term. However, if the advance has not been repaid prior to the last three months of the Contract term, the Grantee must deduct at least one-third of the remaining advance from each of the last three months' reimbursement requests. If the advance is not repaid prior to the last three months of the Contract term, DSHS will reduce the reimbursement request by one-third of the remaining balance of the advance.

**ATTACHMENT A.2**  
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July 1, 2018 through June 30, 2019

**I. GRANTEE RESPONSIBILITIES**

Grantee will:

- A. Perform activities in support of the PHEP Cooperative Agreement from the Centers for Disease Control and Prevention (CDC) to align PHEP and Hospital Preparedness Programs (HPP) and advance public health and healthcare preparedness.
- B. Perform the activities required under this Contract in the following county: Hidalgo County.
- C. Provide System Agency with situational awareness data generated through interoperable networks of electronic data systems.
- D. Address the following public health preparedness capabilities:
  1. Capability 1 – Community Preparedness is the ability of communities to prepare for, withstand, and recover – in both the short and long terms – from public health incidents.
  2. Capability 2 – Community Recovery is the ability to collaborate with community partners (e.g., healthcare organizations, business, education, and emergency management) to plan and advocate for the rebuilding of public health, medical, and mental/behavioral health systems to at least a level of functioning comparable to pre-incident levels and improved levels where possible.
  3. Capability 3 – Emergency Operations Center Coordination is the ability to direct and support an event or incident with public health or medical implications by establishing a standardized, scalable system of oversight, organization, and supervision consistent with jurisdictional standards and practices with the National Incident Management System.
  4. Capability 4 – Emergency Public Information and Warning is the ability to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management responders.
  5. Capability 5 – Fatality Management is the ability to coordinate with other organizations (e.g., law enforcement, healthcare, emergency management, and medical examiner/coroner) to ensure the proper recovery, handling, identification, transportation, tracking, storage, and disposal of human remains and personal effects; certify cause of death; and facilitate access to mental/behavioral health services to the family members, responders, and survivors of an incident.
  6. Capability 6 – Information Sharing is the ability to conduct multijurisdictional, multidisciplinary exchange of health-related information and situational awareness data among federal, state, local, territorial, and tribal levels of government, and the private sector. This capability includes the routine sharing of information as well as

**ATTACHMENT A.2**  
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- issuing of public health alerts to federal, state, local, territorial, and tribal levels of government and the private sector in preparation for and in response to events or incidents of public health significance.
7. **Capability 7 – Mass Care** is the ability to coordinate with partner agencies to address the public health, medical, and mental/behavioral health needs of those impacted by an incident at a congregate location. This capability includes the coordination of ongoing surveillance and assessment to ensure that local health needs continue to be met as the incident evolves.
  8. **Capability 8 – Medical Countermeasure Dispensing** is the ability to provide medical countermeasures (including vaccines, antiviral drugs, antibiotics, antitoxin, etc.) in support of treatment or prophylaxis (oral or vaccination) to the identified population in accordance with public health guidelines and/or recommendations.
  9. **Capability 9 – Medical Materiel Management and Distribution** is the ability to acquire, maintain (e.g., cold chain storage or other storage protocol), transport, distribute, and track medical materiel (e.g., pharmaceuticals, gloves, masks, and ventilators) during an incident and to recover and account for unused medical materiel, as necessary, after an incident.
  10. **Capability 10 – Medical Surge** is the ability to provide adequate medical evaluation and care during events that exceed the limits of the normal medical infrastructure of an affected community. It encompasses the ability of the healthcare system to survive a hazard impact and maintain or rapidly recover operations that were compromised.
  11. **Capability 11 – Non-Pharmaceutical Interventions** is the ability to recommend to the applicable lead agency (if not public health) and implement, if applicable, strategies for disease, injury, and exposure control. Strategies include the following: isolation and quarantine; restrictions on movement and travel advisory/warnings; social distancing; external decontamination; hygiene; and precautionary behaviors.
  12. **Capability 12 – Public Health Laboratory Testing** is the ability to conduct rapid and conventional detection, characterization, confirmatory testing, data reporting, investigative support, and laboratory networking to address actual or potential exposure to all-hazards. Hazards include chemical, radiological, and biological, and biological agents in multiple matrices that may include clinical samples, food, and environmental samples (e.g., water, air, and soil). This capability supports routine surveillance, including pre-event incident and post-exposure activities.
  13. **Capability 13 – Public Health Surveillance and Epidemiological Investigations** is the ability to create, maintain, support, and strengthen routine surveillance and detection systems and epidemiological investigation processes, as well as to expand these systems and processes in response to incidents of public health significance.
  14. **Capability 14 – Responder Safety and Health** describes the ability to protect public

## **ATTACHMENT A.2 STATEMENT OF WORK**

July 1, 2018 through June 30, 2019

health agency staff responding to an incident and the ability to support the health and safety needs of hospital and medical facility personnel, if requested.

15. Capability 15 – Volunteer Management is the ability to coordinate the identification, recruitment, registration, credential verification, training, and engagement of volunteers to support the jurisdictional public health agency's response to incidents of public health significance.

- E. Match funds awarded under this Contract with costs or third-party contributions that are not paid by the federal government under another award, except where authorized by federal statute to be used for cost sharing or matching. The non-federal contributions (match) may be provided directly or through donations from public or private entities and may be in cash or in-kind donations, fairly evaluated, including plant, equipment, or services. The costs that the Grantee incurs in fulfilling the matching or cost-sharing requirement are subject to the same requirements, including the cost principles, that are applicable to the use of Federal funds, including prior approval requirements and other rules for allowable costs as described in 45 CFR 74.23 and 45 CFR 92.24, as amended.

Grantee will provide matching in the amount of at least ten percent (10%) of the allocation amount. Cash match is defined as an expenditure of cash by the Grantee on allowable costs of this Contract that are borne by the Grantee. In-kind match is defined as the dollar value of non-cash contributions by a third party given in goods, commodities, or services that are used in activities that benefit this Contract's project and that are contributed by non-federal third parties without charge to the Grantee. The criteria for match must:

1. Be an allowable cost under the applicable federal cost principle;
2. Be necessary and reasonable for the efficient accomplishment of project or program objectives;
3. Be verifiable within the Grantee's (or subcontractor's) records;
4. Be documented, including methods and sources, in the approved budget (applies only to cost reimbursement contracts);
5. Not be included as contributions toward any other federally-assisted project or program (match can count only once);
6. Not be paid by the federal government under another award, except where authorized by federal statute to be used for cost sharing or match;
7. Conform to other provisions of governing circulars/statutes/regulations as applicable for the Contract;
8. Be adequately documented;
9. Follow procedures for generally accepted accounting practices as well as meet audit requirements; and
10. Value the in-kind contributions reported and must be supported by documentation

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reflecting the use of goods and/or services during the Contract term.

- F. In the event of a public health emergency involving a portion of the state, mobilize and dispatch staff or equipment purchased with funds from previous PHEP cooperative agreements and not currently performing critical duties in the jurisdiction served, to the affected area of the state upon receipt of a written request from System Agency.
- G. Inform System Agency in writing if Grantee will not continue performance under this Contract within 30 days of receipt of an amended standard(s) or guideline(s). System Agency may terminate this Contract immediately or within a reasonable period of time as determined by System Agency.
- H. Develop, implement and maintain a timekeeping system for accurately documenting staff time and salary expenditures for all staff funded through this Contract, including partial full-time employees and temporary staff.
- I. Complete and submit programmatic reports as directed by System Agency in a format specified by System Agency. Due dates will be listed in the most current System Agency reporting schedule, to be released within thirty (30) days of the Contract start date. Grantee will provide System Agency other reports, including financial reports, that System Agency determines necessary to accomplish the objectives of this Contract and to monitor compliance.
- J. Submit Performance Measures to System Agency within an established timeframe designated by System Agency as required by the CDC.
- K. Submit the work plan that encompasses the Contract term, due to System Agency within an established timeline designated by System Agency.
- L. Conduct, or participate in, an annual Training and Exercise Planning Workshop (TEPW) with all applicable agencies in accordance with Homeland Security Exercise and Evaluation Program (HSEEP) guidelines to develop a strategy and structure for a multi-year Training and Exercise Plan (TEP). Prepare, maintain, and upon request, submit a copy of the TEPW agenda and participant roster as documentation of TEPW attendance.
- M. Submit a current Multi-Year Training & Exercise Plan that covers FY19 through FY23 (July 1, 2018, through June 30, 2023) to System Agency within an established timeframe designated by System Agency, using the template provided by System Agency.

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- N. Conduct, or participate in, at least one annual Preparedness Exercise consistent with their TEP. Submit a Notification of Exercise (NOE) form to System Agency Preparedness Exercise inbox at [preparednessexercise@dshs.texas.gov](mailto:preparednessexercise@dshs.texas.gov) no later than sixty (60) days prior to the start of the exercise.
- O. Submit at least one (1) After Action Review/Improvement Plan (AAR/IP). All AAR/IPs must be submitted to System Agency Preparedness Exercise inbox, [preparednessexercise@dshs.texas.gov](mailto:preparednessexercise@dshs.texas.gov) within sixty (60) days of the completion of the exercise to System Agency Exercise Team and no later than June 30, 2019. AAR/IPs must be completed in accordance with System Agency Exercise Guide.
- P. Complete and submit all supporting documents for the Operational Readiness Review (ORR) twenty (20) business days prior to review date. The review takes place every other year, however documentation will still be required annually.
1. Provide updated distribution data document (official name to be determined) for submission to System Agency SNS SharePoint by April 1, 2019;
  2. Perform and submit metrics (data collection sheets) on each of the three (3) SNS operation drills (at pre-identified Point of Dispensing [POD] locations and existing call down rosters) to DSHS SharePoint and submit After Action Reviews/Improvements sixty (60) days after drill completion or by April 1, 2019, to the [preparednessexercise@dshs.texas.gov](mailto:preparednessexercise@dshs.texas.gov) inbox. Acceptable drills include:
    - a. Staff Call Down;
    - b. Facility Set-up;
    - c. POD Activation; and
    - d. Participate in and attend the regional MCM seminar, when held.
- Q. Submit the Capabilities Planning Guide assessment due to System Agency within an established timeframe designated by System Agency.
- R. Submit the Texas Public Health Risk Assessment Tool due to System Agency within an established timeframe designated by System Agency.
- S. Submit the Mid-Year Report due to System Agency within an established timeframe designated by System Agency.
- T. Complete an End-Of-Year Performance Report in a format specified by System Agency no later than August 15, 2019.

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- U. Designate a member of the PHEP program to attend, in person, three (3) PHEP quarterly meetings during the Contract term. If the designee is unable to attend any of the meetings in person, the Grantee must notify System Agency in writing as to the reason for non-compliance.
  
- V. Designate a member of the PHEP program to attend, in person, four regional healthcare coalition meetings during the term of the Contract from July 1, 2018, to June 30, 2019. Submit sign-in sheets from meetings as evidence of attendance.
  
- W. Immediately notify System Agency in writing if Grantee is legally prohibited from providing any report under this Contract.
  
- X. Use the Texas Disaster Volunteer Registry (TDVR), which is Texas' version of the Emergency System for the Advanced Registration of Volunteer Health Professionals (ESAR-VHP) as their main volunteer management tool, if utilizing Medical Reserve Corps or other volunteer groups. If Grantee uses volunteers as provided in the Section, the Grantee must either:
  - 1. Request access to the TDVR from the State ESAR-VHP System Administrator, enter all volunteer data into the system using the Intermedix Data Input Form, and submit the form to the State ESAR-VHP System Administrator; or
  - 2. Petition System Agency in writing for an exemption from using the TDVR. Successful petitioners must be currently using a fully operational, ESAR-VHP-compliant, web-based volunteer management system. If petitioning System Agency to use a fully operational, ESAR-VHP-compliant, web-based volunteer management system, then the substitute system must meet, but is not limited to, the following federal requirements:
    - a. Must offer Internet-based registration;
    - b. Volunteer information is collected and maintained in a manner consistent with all federal, state and local laws governing security and confidentiality;
    - c. Must be able to register and collect the credentials and qualifications of health professionals that are then verified with the issuing entity or appropriate authority;
    - d. Must be able to verify the credentials of the 20 mandated professions;
    - e. Must be able to assign to one of four emergency credential levels;
    - f. Must be able to identify volunteers willing to participate in a federally coordinated emergency response;
    - g. Must be able to re-verify professional credentials every 6 months;

## **ATTACHMENT A.2 STATEMENT OF WORK**

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- h. Must have the ability to include the differing scope of work information for each of the 20 mandated professions;
  - i. Must be able to record all volunteer health professional affiliations; and
  - j. Must be able to verify that all volunteers across all credential levels not be included on the U.S. Department of Health and Human Services, Office of the Inspector General's List of Excluded Individuals/Entities (LEIE).
  - k. Additionally, the fully operational, ESAR-VHP-compliant, web-based volunteer management system must be able to register, collect, and verify the credentials and qualifications of the health professionals entered into the system.
  
- Y. Grantee may not use funds for research, clinical care, fund-raising activities or lobbying, construction or major renovations, reimbursement of pre-award costs, to supplant existing state or federal funds for activities, payment or reimbursement of backfilling costs for staff, purchase of vehicles of any kind, or funding an award to another party or provider who is ineligible.
  
- Z. Cooperate with System Agency to coordinate all planning, training and exercises performed under this Contract with local emergency management and the Texas Division of Emergency Management (TDEM) District Coordinators assigned to the Grantee's sub-state region, to ensure consistency and coordination of requirements at the local level and eliminate duplication of effort between the various domestic preparedness funding sources in the state.
  
- AA. Coordinate all risk communication activities with the System Agency Communications Unit by using System Agency's core messages posted on the System Agency website, and submitting copies of draft risk communication materials to System Agency for coordination prior to dissemination.
  
- BB. Initiate the purchase of all equipment approved in writing by the System Agency in the first quarter of the FY19 Contract term (July 1, 2018 – June 30, 2019), as applicable. Failure to timely initiate the purchase of equipment may result in the loss of availability of funds for the purchase of equipment. Requests to purchase previously approved equipment after the first quarter in the Contract must be submitted to the assigned System Agency contract manager.
  
- CC. Controlled Assets include firearms, regardless of the acquisition cost, and the following assets with an acquisition cost of \$500 or more, but less than \$5,000: desktop and laptop computers (including notebooks, tablets and similar devices), non-portable printers and

## **ATTACHMENT A.2 STATEMENT OF WORK**

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copiers, emergency management equipment, communication devices and systems, medical and laboratory equipment, and media equipment. Controlled Assets are considered Supplies.

- DD. Grantee shall maintain an inventory of equipment, supplies defined as Controlled Assets, and real property and submit an annual cumulative report of the equipment and other property on HHS System Agency Grantee's Property Inventory Report to the assigned System Agency contract manager by email not later than October 15 of each year.
- EE. System Agency funds must not be used to purchase buildings or real property without prior written approval from the System Agency. Any costs related to the initial acquisition of the buildings or real property are not allowable without written pre-approval.
- FF. At the expiration or termination of this Contract for any reason, title to any remaining equipment and supplies purchased with funds under this Contract reverts to System Agency. Title may be transferred to any other party designated by System Agency. The System Agency may, at its option and to the extent allowed by law, transfer the reversionary interest to such property to Grantee.
- GG. Comply with all applicable federal and state laws, rules, and regulations including, but not limited to, the following:
  - 1. Public Law 107-188, Public Health Security and Bioterrorism Preparedness and Response Act of 2002;
  - 2. Public Law 113-05, Pandemic and All-Hazards Preparedness Reauthorization Act; and
  - 3. Texas Health and Safety Code Chapter 81.
- HH. Comply with all applicable regulations, standards and guidelines in effect on the beginning date of the Term of this Contract.
- II. Submit a current Texas Preparedness and Evaluation Process (TxPEP) report to System Agency within an established timeframe designated by System Agency, using the template provided by System Agency.
- JJ. Submit a report on the Jurisdiction's vulnerable population outreach activities to System Agency within an established timeframe designated by System Agency, using a template provided by System Agency.
- KK. Work with the Regional Health Care Coalition to develop comprehensive preparedness

**ATTACHMENT A.2**  
**STATEMENT OF WORK**  
July 1, 2018 through June 30, 2019

strategies. Plans will be submitted to System Agency by the Health Care Coalition.

**II. PERFORMANCE MEASURES**

System Agency will monitor the Grantee's performance of the requirements and compliance with the Contract's terms and conditions. Grantee must demonstrate adherence to PHEP reporting deadlines and the capability to receive, stage, store, distribute, and dispense materiel during a public health emergency. Failure to meet these requirements may result in withholding a portion of the current PHEP base awards.

The initial reporting requirement schedule for the requirements is subject to change as System Agency and CDC may modify requirements and due dates. System Agency will send Grantee a requirements schedule within thirty (30) days of the Contract start date.

**III. INVOICE AND PAYMENT**

- A. Grantee will request payment using the State of Texas Purchase Voucher (Form B-13) on a monthly basis and acceptable supporting documentation for reimbursement of the required services/deliverables. Additionally, the Grantee will submit the Financial Status Report (FSR-269A) and the Match Certification Form (B-13A). Vouchers, supporting documentation, Financial Status Reports, and Match Certification Forms should be mailed or emailed to the addresses below.

Department of State Health Services  
Claims Processing Unit, MC 1940  
1100 West 49th Street  
P.O. Box 149347  
Austin, TX 78714-9347  
FAX: (512) 458-7442  
EMAIL: [invoices@dshs.texas.gov](mailto:invoices@dshs.texas.gov), [Php.vouchersupport@dshs.texas.gov](mailto:Php.vouchersupport@dshs.texas.gov) &  
[CMSInvoices@dshs.texas.gov](mailto:CMSInvoices@dshs.texas.gov)

B-13, B-13A, and supporting documentation should be sent to: [invoices@dshs.texas.gov](mailto:invoices@dshs.texas.gov),  
[Php.vouchersupport@dshs.texas.gov](mailto:Php.vouchersupport@dshs.texas.gov) & [CMSInvoices@dshs.texas.gov](mailto:CMSInvoices@dshs.texas.gov)

FSRs should be sent to: [invoices@dshs.texas.gov](mailto:invoices@dshs.texas.gov), [Php.vouchersupport@dshs.texas.gov](mailto:Php.vouchersupport@dshs.texas.gov),  
[FSRGrants@dshs.texas.gov](mailto:FSRGrants@dshs.texas.gov) & [CMSInvoices@dshs.texas.gov](mailto:CMSInvoices@dshs.texas.gov)

**ATTACHMENT A.2**  
**STATEMENT OF WORK**  
July 1, 2018 through June 30, 2019

- B. Grantee will be paid on a monthly basis and in accordance with **Attachment B, Budget**.
- C. System Agency reserves the right, where allowed by legal authority, to redirect funds in the event of financial shortfalls. System Agency will monitor Grantee's expenditures on a quarterly basis. If expenditures are below that projected in Grantee's total Contract amount, Grantee's budget may be subject to a decrease for the remainder of the Term of the Contract. Vacant positions existing after ninety days may result in a decrease in funds.

Grantee may request a one-time working capital advance not to exceed 12% of the total amount of the Contract funded by System Agency. All advances must be expended by the end of the Contract term. Advances not expended by the end of the Contract term must be refunded to System Agency.

- D. Grantee will repay all or part of advance funds at any time during the Contract's term. However, if the advance has not been repaid prior to the last three months of the Contract term, the Grantee must deduct at least one-third of the remaining advance from each of the last three months' reimbursement requests. If the advance is not repaid prior to the last three months of the Contract term, System Agency will reduce the reimbursement request by one-third of the remaining balance of the advance.

**ATTACHMENT B**  
**BUDGET**  
 AMENDMENT NO. 01  
 HHSC CONTRACT NO. 537-18-0176-00001

**HIDALGO COUNTY**

<b>Budget Categories</b>	<b>FY18 Budget Summary (7/1/17 – 6/30/18)</b>	<b>FY19 Budget Summary (7/1/18 – 6/30/19)</b>	<b>Total Budget Summary</b>
Personnel	\$445,562.00	\$437,256.00	\$882,818.00
Fringe Benefits	\$162,630.00	\$166,245.00	\$328,875.00
Travel	\$6,797.00	\$9,851.00	\$16,648.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$15,994.00	\$4,263.00	\$20,257.00
Contractual	\$0.00	\$0.00	\$0.00
Other	\$96,600.00	\$13,968.00	\$110,568.00
Sum of Direct Costs	\$727,583.00	\$631,583.00	\$1,359,166.00
Indirect Costs	\$0.00	\$0.00	\$0.00
Sum of Total Direct Costs and Indirect Costs	\$727,583.00	\$631,583.00	\$1,359,166.00
Less Match (Cash or In-Kind)	\$65,917.00	\$57,417.00	\$123,334.00
<b>TOTAL</b>	<b>\$661,666.00</b>	<b>\$574,166.00</b>	<b>\$1,235,832.00</b>



## Fiscal Federal Funding Accountability and Transparency Act (FFATA) CERTIFICATION

As the duly authorized representative (Signor) of the Contractor, I hereby certify that the statements made by me in this certification form are true, complete and correct to the best of my knowledge.

Did your organization have a gross income, from all sources, of less than \$300,000 in your previous tax year?  Yes  No

If your answer is "Yes", skip questions "A", "B", and "C" and finish the certification.  
If your answer is "No", answer questions "A" and "B".

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**A. Certification Regarding % of Annual Gross from Federal Awards.**

Did your organization receive 80% or more of its annual gross revenue from federal awards during the preceding fiscal year?  Yes  No

**B. Certification Regarding Amount of Annual Gross from Federal Awards.**

Did your organization receive \$25 million or more in annual gross revenues from federal awards in the preceding fiscal year?  Yes  No

If your answer is "Yes" to both question "A" and "B", you must answer question "C".  
If your answer is "No" to either question "A" or "B", skip question "C" and finish the certification.

---

**C. Certification Regarding Public Access to Compensation Information.**

Does the public have access to information about the compensation of the senior executives in your business or organization (including parent organization, all branches, and all affiliates worldwide) through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?  Yes  No

If your answer is "Yes" to this question, where can this information be accessed?

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If your answer is "No" to this question, you must provide the names and total compensation of the top five highly compensated officers below.

**Provide compensation information here:**

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### Certificate Of Completion

Envelope Id: 2CE0EC8662544B2CB471B3ED40FD3497  
Subject: Amending 1,235,832.00; 537-18-0176-00001 County of Hidalgo A-1; DSHS/CMS  
Source Envelope:  
Document Pages: 33 Signatures: 0  
Certificate Pages: 2 Initials: 0  
AutoNav: Enabled  
EnvelopeId Stamping: Enabled  
Time Zone: (UTC-06:00) Central Time (US & Canada)

Status: Sent

Envelope Originator:  
Texas Health and Human Services Commission  
1860 Michael Faraday Dr  
Reston, VA 20190  
PCS\_DocuSign@hhsc.state.tx.us  
IP Address: 167.137.1.17

### Record Tracking

Status: Original  
March 23, 2018  
Holder: Texas Health and Human Services  
Commission  
PCS\_DocuSign@hhsc.state.tx.us

Location: DocuSign

### Signer Events

Greta Rymal  
Greta.Rymal@hhsc.state.tx.us  
Texas Health and Human Services Commission  
Security Level: Email, Account Authentication  
(None)  
Electronic Record and Signature Disclosure:  
Not Offered via DocuSign

### Signature

#### Completed

Using IP Address: 107.77.218.153  
Signed using mobile

### Timestamp

Sent: March 23, 2018  
Viewed: March 23, 2018  
Signed: March 23, 2018

Ramon Garcia  
ramon.garcia@co.hidalgo.tx.us  
Hidalgo County Judge  
Hidalgo County  
Security Level: Email, Account Authentication  
(None)  
Electronic Record and Signature Disclosure:  
Not Offered via DocuSign

Sent: March 23, 2018

Andy Marker  
Edward.Marker@hhsc.state.tx.us  
Security Level: Email, Account Authentication  
(None)  
Electronic Record and Signature Disclosure:  
Not Offered via DocuSign

Karen Ray  
Karen.Ray@hhsc.state.tx.us  
Security Level: Email, Account Authentication  
(None)  
Electronic Record and Signature Disclosure:  
Not Offered via DocuSign

Charles Smith  
Charles.Smith@hhsc.state.tx.us  
Security Level: Email, Account Authentication  
(None)  
Electronic Record and Signature Disclosure:  
Not Offered via DocuSign

### In Person Signer Events

### Signature

### Timestamp

### Editor Delivery Events

### Status

### Timestamp

**Agent Delivery Events**

**Status**

**Timestamp**

**Intermediary Delivery Events**

**Status**

**Timestamp**

**Certified Delivery Events**

**Status**

**Timestamp**

**Carbon Copy Events**

**Status**

**Timestamp**

Gracie Perez  
gracie.perez@hhsc.state.tx.us  
Security Level: Email, Account Authentication (None)  
**Electronic Record and Signature Disclosure:**  
Not Offered via DocuSign

**COPIED**

Sent: March 23, 2018

Deserie Burrell  
deserie.burrell@dshs.state.tx.us  
Contract Manager  
Texas Health and Human Services Commission  
Security Level: Email, Account Authentication (None)  
**Electronic Record and Signature Disclosure:**  
Not Offered via DocuSign

**COPIED**

Sent: March 23, 2018  
Viewed: March 23, 2018

Mike Escaname  
mike.escaname@hchd.org  
Security Level: Email, Account Authentication (None)  
**Electronic Record and Signature Disclosure:**  
Not Offered via DocuSign

**COPIED**

Sent: March 23, 2018  
Viewed: March 23, 2018

Pam Wells  
pam.wells@hhsc.state.tx.us  
Security Level: Email, Account Authentication (None)  
**Electronic Record and Signature Disclosure:**  
Not Offered via DocuSign

CMU Contract Inbox  
cmucontracts@dshs.texas.gov  
Security Level: Email, Account Authentication (None)  
**Electronic Record and Signature Disclosure:**  
Not Offered via DocuSign

**Notary Events**

**Signature**

**Timestamp**

**Envelope Summary Events**

**Status**

**Timestamps**

Envelope Sent

Hashed/Encrypted

March 23, 2018

**Payment Events**

**Status**

**Timestamps**