



TEXAS
Health and Human
Services

Texas Department of State Health Services

John Hellerstedt, M.D.
Commissioner

The Honorable Richard Cortez, County Judge
Hidalgo County
100 E. Cano Street
Edinburg, Texas 78539

Subject: Coronavirus 2019 (COVID-19)
 Contract Number: HHS000769200001, Amendment 3
 Contract Amount: \$1,429,138.00
 Contract Term: April 9, 2020 through March 15, 2022

Dear Judge Cortez:

Enclosed is the Public Health Emergency Preparedness Coronavirus 2019 (COVID-19) contract between the Department of State Health Services and Hidalgo County.

The purpose of this amendment is to revise the budget table, to allow for continued support of the Coronavirus 2019 (COVID-19) response and in alignment with the Public Health Crisis Response Cooperative Agreement for Emergency Response from the Centers for Disease Control and Prevention (CDC) in support of public health emergency preparedness.

Please let me know if you have any questions or need additional information.

Sincerely,

Quynh-Nhi Ge, CTCM
Contract Manager
512-776-2304
Quynhnhi.Ge@dshs.texas.gov

**THE DEPARTMENT OF STATE HEALTH SERVICES
CONTRACT NO. HHS000769200001
AMENDMENT NO. 3**

The **DEPARTMENT OF STATE HEALTH SERVICES** and **HIDALGO COUNTY** (“Grantee”), collectively the Parties to that certain grant Contract effective April 9, 2020 and denominated DSHS Contract No. HHS000769200001, now want to further amend the Contract.

WHEREAS, the Parties want to revise the Budget by moving funds from the Equipment, Travel, Supplies, and Other category to the Personnel and Fringe Benefits category; and

WHEREAS, the reallocation of funds will not increase the total amount of the Contract.

The Parties therefore agree as follows:

1. **ATTACHMENT B** of the Contract, **BUDGET**, is hereby deleted in its entirety and replaced with the following revised budget table:

| Budget Categories | COVID 19 Pre-award Cost from January 20, 2020 | COVID 19 Funding Allocation- Base | COVID 19 Funding Allocation-A.1 | Totals |
|----------------------------------|--|--|--|--------------------|
| Personnel | \$0 | \$342,774 | \$327,901 | \$670,675 |
| Fringe Benefits | \$0 | \$134,539 | \$121,979 | \$256,518 |
| Travel | \$0 | \$0 | \$3,183 | \$3,183 |
| Equipment | \$0 | \$18,816 | \$0 | \$18,816 |
| Supplies | \$42,504 | \$133,342 | \$158,991 | \$334,837 |
| Contractual | \$0 | \$0 | \$0 | \$0 |
| Other | \$0 | \$33,345 | \$111,764 | \$145,109 |
| Total Direct Costs | \$42,504 | \$662,816 | \$723,818 | \$1,429,138 |
| Indirect Cost Rate Amount | \$0 | \$0 | \$0 | \$0 |
| Contract Total | \$42,504 | \$662,816 | \$723,818 | \$1,429,138 |

2. This Amendment shall be effective as of the date last signed below.
3. Except as modified by this Amendment, all terms and conditions of the Contract, as amended, shall remain in effect.
4. Any further revisions to the Contract shall be by written agreement of the Parties.

SIGNATURE PAGE FOLLOWS

**SIGNATURE PAGE FOR AMENDMENT NO. 3
DEPARTMENT OF STATE HEALTH SERVICES CONTRACT NO. HHS000769200001**

DEPARTMENT OF STATE HEALTH SERVICES HIDALGO COUNTY

By: _____

By: _____

Date of Signature: _____

Date of Signature: _____