

FY22 Title V CHD Renewal Amendment (Hidalgo)

**TEXAS HEALTH AND HUMAN SERVICES COMMISSION  
HIDALGO COUNTY HEALTH DEPARTMENT  
(HHSC CONTRACT NO. HHS000687600002)**

**AMENDMENT NO. 1**

The Health and Human Services Commission (“**HHSC**” or “**System Agency**”) and Hidalgo County Health Department (“**Grantee**”), who are collectively referred to herein as the “**Parties**,” to that certain Title V Child Health and Dental Grant Services Contract that was effective September 1, 2020 and denominated as HHSC Contract No. HHS000687600002 (the “**Contract**”), now desire to amend the Contract.

**Whereas**, the Parties desire to allot additional funding, revise federal grant information, and extend the term of the Contract to allow for successful completion of the Project; and

**Whereas**, the Parties have chosen to exercise their option to extend the term of and amend the Contract in accordance with Section IV and Section 9.1 of Attachment D to the Contract.

**Now, therefore**, the Parties hereby amend and modify the Contract as follows:

1. **Section IV, Duration**, of the Contract is deleted in its entirety and replaced with the following:

**IV. Duration**

The Contract is effective on **September 1, 2020** and terminates on **August 31, 2022**, unless renewed, extended, or terminated pursuant to the terms and conditions of the Contract. HHSC, at its sole discretion, may extend this Contract for any period(s) of time, provided the Contract term, including all extensions or renewals, does not exceed four years. Notwithstanding the limitation in the preceding sentence, HHSC, at its sole discretion, also may extend the Contract beyond four years as necessary to ensure continuity of service, for purposes of transition, or as otherwise determined by HHSC to serve the best interest of the State.

2. **Section V, Payment for Services Provided, of the Contract is amended by adding funding in the amount of \$11,024.00 for state fiscal year 2022. The total not-to-exceed amount of this Contract is increased to \$37,071.00.**
3. **Section X, Additional Grant Information**, of the Contract is amended to reflect an updated DUNS of “807391511”, FAIN of “B0440164”, Federal Award Date of “October 1, 2020” for state fiscal years 2021-22.

1. **Section 6.2, Attachment A, Eligible Population**, of the Contract is deleted in its entirety and replaced with the following:

6.2 The contracted number of clients for Child Health Services and Child Dental Services, and the average cost per client amount, are set forth in Attachment C to this Contract. These numbers and average costs represent the Grantee’s projected number of unduplicated clients to be served during the Contract period. If during the applicable Contract period it is foreseen

that the Grantee might be unable to serve the contracted number of clients, HHSC may reduce the Grantee’s award amount in order to encumber funds under another Program services contract so that additional clients may be served, or to expend the funds on other appropriate purpose.

4. **Section 1.1, Attachment C, Budget**, of the Contract is amended by deleting Table 1 in its entirety and replaced with the following:

<b>Table 1 – Budget Categories</b>		<b>FY 2021</b>	<b>FY 2022</b>
<b>Child Health</b> <i>(including costs for laboratory and case management)</i>	Number of clients to be served	430	215
	Average cost per client	\$51.00	\$51.00
	Total \$ Amount for all services provided	\$22,047.00	\$11,024.00
<b>Child Dental</b>	Number of clients to be served	0	0
	Average cost per client	\$0.00	\$0.00
	Total \$ Amount for all services provided	\$0.00	\$0.00

5. This Amendment shall be effective as of September 1, 2021.
6. Except as amended and modified by this Amendment, all terms and conditions of the Contract, as amended, shall remain in full force and effect.
7. Any further revisions to the Contract shall be by written agreement of the Parties.

**Health and Human Services  
Commission**

**Hidalgo County Health Department**

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

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

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

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

**Certificate Of Completion**

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Lindsay Rodgers  
lindsay.rodgers@hhs.texas.gov  
Security Level: Email, Account Authentication (None)

**Electronic Record and Signature Disclosure:**  
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Janete Olague  
janete.olague01@hhs.texas.gov  
Security Level: Email, Account Authentication (None)

**Electronic Record and Signature Disclosure:**  
Not Offered via DocuSign

Eduardo Olivarez  
eduardo.olivarez@hchd.org  
Security Level: Email, Account Authentication (None)

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