| Marion Cou  | Contract R   | leview Sh           | leet                          |                                   |
|---|--|---------------------|-------------------------------|-----------------------------------|
| OREGON<br>FINANCE DEPARTM                                 |  | Co                  | ntract #: HE-2921-19          |                                   |
| Person Sending: Ret                                       | ecca Werner  | Department:         | Health & Human S              | Services                          |
| Contact Phone #: 503                                      | -361-2795  | Date Sent:          |                               |                                   |
| Contract 🗹 A  | mendment# 7 🗌 Lease 🔲 IG   | A 🗌 MOU             | Grant (attach approv          | ved grant award transmittal form) |
| Title: Public Health Inte                                 | rgovernmental Agreement #159823-7 FY2  | 019-21              |                               |                                   |
| Contractor's Name: C                                      | regon Health Authority   |                     |                               |                                   |
| Term - Date From: Jul                                     | y 1, 2019  | Expires: June       | e 30, 2021                    |                                   |
| Contract Total: \$2,941                                   | 814.00 Amendment Amoun   | t: <u>-\$29,387</u> | New Contract                  | Total: <u>\$2,912,427.00</u>      |
| Source Selection I  | <b>Iethod:</b> Exemption (identify rule/sta  | tute)               | # 50-00                       | 10 General Exemption              |
| Additional Consid   | erations (check all that apply   | )                   |                               |                                   |
| □Board Order#   |  | □Fea                | sibility Determinatio         | n (attach approved form)          |
| <br>Incoming Funds  |  | Fee                 | leral Funds (attach sub-rec   | cipient / contractor analysis)    |
|   | ntractor (LECS) approval date:   |                     | nstatement (attach written    |                                   |
| Insurance Waiv  |  |                     | roactive (attach written just | - ,                               |
|   |  |                     | j                             |                                   |
|   | (required for all goods /software greater than vices or Grant Award:   | \$3,000)            |                               |                                   |
| Oregon Health Authority co<br>health services and program | ntracts with Marion County for the provision on<br>ns in Marion County. Amendment Seven rer<br>-09 Maternal & Child Health Services Oregon | noves \$27,815 fr   | om PE42-07 Maternal & C       | child Health Services;            |
|   | FOR FINA   | NCE USE             |                               |                                   |
| Date Finance Received                                     | : BOC Planning Date  | :                   | Date Legal Rec                | ceived:                           |
| Comments:   |  |                     |                               |                                   |
| REQUIRED APPROV   | ALS:   |                     |                               |                                   |
| Finance - Contracts                                       | Date   | Risk Mana           | ger                           | Date                              |
| Legal Counsel   | Date   | Chief Adm           | inistrative Officer           | Date                              |
| Date  | To be filed  | 🗌 Added t           | o master list                 |                                   |
| Returned to   | Departme   | nt for              |                               | signatures                        |



| Meeting date: | April 15, 20 | 020                          |                       |                 |                |    |
|---------------|--------------|------------------------------|-----------------------|-----------------|----------------|----|
| Department:   | Health & F   | Human Services               | Agenda Planning Date: | April 9, 2020   | Time required: | 10 |
| Audio/Vis     | ual aids     |                              | ·                     |                 |                |    |
| Contact:      | Ryan Matt    | thews, Interim Administrator | Phone                 | e: 503-361-2670 |                |    |
| Department H  | lead Signat  | ure:                         |                       |                 |                |    |

| TITLE  | Oregon Health Authority 2019-21 IGA #159823 Amendment Seven for the financing of Public Health Services.  |
|--|---|
| lssue, Description &<br>Background           | Oregon Health Authority Biennium 2019-21 IGA #159823 with Marion County Health & Human Services<br>is to operate and contract for the operation of Public Health Services in accordance with the policies,<br>procedures and administrative rules of the OHA. Amendment Seven is as follows: removes \$27,815 from<br>PE42-07 Maternal & Child Health; removes \$1,572 from PE42-09 Maternal & Child Health Oregon<br>Mothers Care. |
| Financial Impacts:                           | IGA #159823 current total is \$2,941,814. Amendment Seven removes \$29,387 in funds. New IGA #159823 biennium total is \$2,912,427.   |
| Impacts to Department<br>& External Agencies | Health & Human Services anticipates no impact on other departments.   |
| Options for<br>Consideration:                | <ol> <li>Approve Amendment Seven to OHA IGA #159823.</li> <li>Deny approval of Amendment Seven.</li> <li>Take no action at this time.</li> </ol>  |
| Recommendation:                              | Health & Human Services recommends approval of Amendment Seven to OHA IGA #159823 for<br>Financing of Public Health Services.   |
| List of attachments:                         | Amendment Seven to OHA IGA #159823.   |
| Presenter:                                   | Jeremiah Elliott, Sr. Administrative Services Mgr.  |

Copies of completed paperwork sent to the following: (Include names and e-mail addresses.)

Copies to:

Rebecca Werner, rwerner@co.marion.or.us

**OHA - 2019-2021 INTERGOVERNMENTAL AGREEMENT - FOR THE FINANCING OF PUBLIC HEALTH SERVICES** 

**Agreement #159823** 



### SEVENTH AMENDMENT TO OREGON HEALTH AUTHORITY 2019-2021 INTERGOVERNMENTAL AGREEMENT FOR THE FINANCING OF PUBLIC HEALTH SERVICES

In compliance with the Americans with Disabilities Act, this document is available in alternate formats such as Braille, large print, audio recordings, Web-based communications and other electronic formats. To request an alternate format, please send an e-mail to <u>dhs-oha.publicationrequest@state.or.us</u> or call 503-378-3486 (voice) or 503-378-3523 (TTY) to arrange for the alternative format.

This Seventh Amendment to Oregon Health Authority 2019-2021 Intergovernmental Agreement for the Financing of Public Health Services, effective July 1, 2019, (as amended the "Agreement"), is between the State of Oregon acting by and through its Oregon Health Authority ("OHA") and Marion County, ("LPHA"), the entity designated, pursuant to ORS 431.003, as the Local Public Health Authority for Marion County.

### RECITALS

WHEREAS, OHA and LPHA wish to modify the Fiscal Year 2020 (FY20) Financial Assistance Award set forth in Exhibit C of the Agreement.

WHEREAS, OHA and LPHA wish to modify the Exhibit J information required by 2 CFR Subtitle B with guidance at 2 CFR Part 200.

NOW, THEREFORE, in consideration of the premises, covenants and agreements contained herein and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties hereto agree as follows

#### AGREEMENT

- 1. Section 1 of Exhibit C entitled "Financial Assistance Award" of the Agreement for FY20 is hereby superseded and replaced in its entirety by Attachment A attached hereto and incorporated herein by this reference. Attachment A must be read in conjunction with Section 3 of Exhibit C.
- 2. Exhibit J "Information required by 2 CFR Subtitle B with guidance at 2 CFR Part 200" is amended to add to the federal award information datasheet as set forth in Attachment B, attached hereto and incorporated herein by this reference.
- **3.** LPHA represents and warrants to OHA that the representations and warranties of LPHA set forth in Section 2 of Exhibit E of the Agreement are true and correct on the date hereof with the same effect as if made on the date hereof.
- 4. Capitalized words and phrases used but not defined herein shall have the meanings ascribed thereto in the Agreement.
- 5. Except as amended hereby, all terms and conditions of the Agreement remain in full force and effect.
- **6.** The parties expressly ratify the Agreement as herein amended.
- 7. This Amendment may be executed in any number of counterparts, all of which when taken together shall constitute one agreement binding on all parties, notwithstanding that all parties are not signatories to the same counterpart. Each copy of this Amendment so executed shall constitute an original.

#### **OHA - 2019-2021 INTERGOVERNMENTAL AGREEMENT - FOR THE FINANCING OF PUBLIC HEALTH SERVICES**

8. This Amendment becomes effective on the date of the last signature below.

IN WITNESS WHEREOF, the parties hereto have executed this Amendment as of the dates set forth below their respective signatures.

#### 9. Signatures.

#### STATE OF OREGON ACTING BY AND THROUGH ITS OREGON HEALTH AUTHORITY (OHA)

By:

Name: /for/ Lillian Shirley, BSN, MPH, MPA

 Title:
 Public Health Director

Date:

## MARION COUNTY LOCAL PUBLIC HEALTH AUTHORITY

| By:    |                       |  |
|--------|-----------------------|--|
| Name:  | Ryan Matthews         |  |
| Title: | Interim Administrator |  |
| Date:  |                       |  |

#### **DEPARTMENT OF JUSTICE – APPROVED FOR LEGAL SUFFICIENCY**

Approved by Steven Marlowe, Senior Assistant Attorney General on July 26, 2019. Copy of emailed approval on file at OHA, OC&P.

### **REVIEWED BY OHA PUBLIC HEALTH ADMINISTRATION**

| By:    |                             |
|--------|-----------------------------|
| Name:  | Derrick Clark (or designee) |
| Title: | Program Support Manager     |
| Date:  |                             |

#### MARION COUNTY SIGNATURE BOARD OF COMMISSIONERS:

| Chair                   | Date                                    |      |  |
|-------------------------|---|------|--|
| Commissioner            | Date                                    |      |  |
| Commissioner            | Date                                    |      |  |
|                         |   |      |  |
| Authorized Signature: _ | Katrina Rothenberger, Division Director | Date |  |
| Authorized Signature: _ | Chief Administrative Officer            | Date |  |
| Reviewed by Signature:  | Marion County Legal Counsel             | Date |  |
| Reviewed by Signature:  | Marion County Contracts & Procurement   | Date |  |

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| State of Oregon Page 1 of 3<br>Oregon Health Authority<br>Public Health Division |  |            |                    |                         |                  |
|--|--|------------|--------------------|-------------------------|------------------|
| 1) Grante  | 96   | 2) Issue [ | Date               | This Action             |                  |
| Name:  | Marion County  | February   | 12, 2020           | AMENDM<br>FY 202        |                  |
| Street:  | 3180 Center St. NE, Suite 2100   | 3) Award   | Period             |                         |                  |
| City:  | Salem  |            | uly 1, 2019 Throug | gh June 30, 202         | 0                |
| State:   | OR Zip Code: 97301   |            |                    |                         |                  |
| 4) OHA F   | Public Health Funds Approved   |            | Autoral            | line in each (          | New              |
|  | Program  |            | Award<br>Balance   | Increase/<br>(Decrease) | New<br>Award Bal |
| PE01-01  | State Support for Public Health  |            | 415,503            | 0                       | 415,503          |
| PE07   | HIV Prevention Services  |            | 117,951            | 0                       | 117,951          |
| PE12   | Public Health Emergency Preparedness and Re<br>(PHEP)                  | sponse     | 153,014            | 0                       | 153,014          |
| PE13-01  | Tobacco Prevention and Education Prgram (TP                            | EP)        | 121,420            | 0                       | 121,420          |
| PE36   | Alcohol & Drug Prevention Education Program (                          | ADPEP)     | 179,375            | 0                       | 179,375          |
| PE40-01  | WIC NSA: July - September  |            | 256,428            | -2,651                  | 253,777          |
| PE40-02  | WIC NSA: October - June  |            | 769,405            | 2,651                   | 772,056          |
| PE40-05  | Farmer's Market  |            | 3,341              | 0                       | 3,341            |
| PE42-03  | MCAH Perinatal General Funds & Title XIX                               |            | 12,055             | 0                       | 12,055           |
| PE42-04  | MCAH Babies First! General Funds                                       |            | 38,524             | 0                       | 38,524           |
| PE42-06  | MCAH General Funds & Title XIX   |            | 22,618             | 0                       | 22,618           |
| PE42-07  | MCAH Title V (July-Sept)   |            | 32,328             | -27,815                 | 4,513            |
| PE42-08  | MCAH Title V (Oct-June)  |            | 96,983             | 0                       | 96,983           |
| PE42-09  | MCAH Oregon Mothers Care Title V (July-Sept)                           |            | 2,004              | -1,572                  | 432              |
| PE42-10  | MCAH Oregon Mothers Care Title V (Oct-June)                            |            | 6,014              | 0                       | 6,014            |
| PE43   | PE43 Public Health Practice (PHP) - Immunization Services<br>(Vendors) |            | 100,129            | 0                       | 100,129          |
| PE46-02  | RH Community Participation & Assurance of Ac<br>(July - Mar)           | cess       | 0                  | 0                       | 0                |
| PE46-03  | RH Community Participation & Access (State Fu                          | 53,892     | 1,013              | 54,905                  |                  |

### Attachment A Financial Assistance Award (FY20)

|           |  | Oregon He  | of Oregon<br>alth Authori<br>alth Divisio |                                |                         | Page 2 of 3      |
|-----------|--|--|---|--------------------------------|-------------------------|------------------|
| 1) Grante | e  |  | 2) Issue [                                | Date                           | This Action             |                  |
| Name:     | Marion   | County   | February                                  | 12, 2020                       | AMENDM<br>FY 202        |                  |
| Street:   | 3180 C   | center St. NE, Suite 2100  | 3) Award                                  | Period                         |                         |                  |
| City:     | Salem  |  |   | uly 1, 2019 Throug             | gh June 30, 2020        | )                |
| State:    | OR   | Zip Code: 97301  |   |                                |                         |                  |
| 4) OHA P  | ublic He   | ealth Funds Approved   |   |                                |                         |                  |
|           | Progra   | m  |   | Award<br>Balance               | Increase/<br>(Decrease) | New<br>Award Bal |
| PE46-04   | -  | mmunity Participation & Access Federal   | Funds                                     | 2,108                          | -1,013                  | 1,095            |
| PE50      | Safe D   | rinking Water (SDW) Program (Vendors   | )   | 118,881                        | 0                       | 118,881          |
| PE51      | Public   | Health Modernization Implementation  |   | 26,982                         | 0                       | 26,982           |
| PE51-01   |  | Leadership, Governance and Program   |   | 256,683                        | 0                       | 256,683          |
| PE51-02   | Region   | al Partnership Implementation  |   | 156,176                        | 0                       | 156,176          |
| 5) Foot I | Notes:   |  |   | 2,941,814                      | -29,387                 | 2,912,427        |
| PE01-0    | <ul> <li>E01-01 1 Initial SFY20: Award is estimated for July 1-September 30, 2019 and will be paid out at 1/3rd.<br/>Awards will be amended pending approval of the State budget.</li> <li>E01-01 2 8/2019: SFY20 Award amended for increase for July 1, 2019-June 30, 2020. Previous footnotes</li> </ul> |  |   |                                |                         |                  |
| PE13-0    | 01 1   | are void and replaced by this one.<br>Initial SFY20: Award is 3 months (Jul<br>out at 1/3rd  | y-Septembe                                | r 2019) of bridge <sup>-</sup> | TPEP funding ar         | nd will be paid  |
| PE13-(    | 01 2   | 8/2019: Award is 5 months (July-Nov<br>1/5th, all previous footnotes are void  |   |                                | funding and will I      | pe paid out at   |
| PE40-0    | 05 1   | 7/2019: Funding available SFY2020  | July - Decem                              | nber 2019                      |                         |                  |
| PE42-(    | 07 1   | Initial SFY20: LPHA shall not use mo<br>MCAH Service on indirect costs. See<br>details.  |   |                                |                         |                  |
| PE42-0    |  |  |   |                                |                         |                  |
| PE42-(    | 09 1   |  |   |                                |                         |                  |
| PE42-1    | 10 1   | Initial SFY20: LPHA shall not use more than 10% of the Title V funds awarded for a particular<br>MCAH Service on indirect costs. See PE42 language under 4. a. (3) Funding Limitations for<br>details. |   |                                |                         |                  |
| PE46-0    | 03 1   | 7/2019: Funding is for July 15, 2019 - June 30, 2020   |   |                                |                         |                  |
| PE46-0    | 04 1   | 7/2019: Funding for July 1-14, 2019  |   |                                |                         |                  |
| PE51      |  |  |   |                                |                         |                  |
| PE51      | 2  |  |   |                                |                         |                  |
| PE51-0    |  | 9/2019: Funding is for period of Octo  |   |                                |                         |                  |
| PE51-(    | 02 1   | 9/2019: Funding is for period of Octo  | ber 1 2019                                | June 30, 2020                  |                         |                  |

| State of Oregon Page 3 of 3<br>Oregon Health Authority<br>Public Health Division   |  |   |   |                         |                  |  |  |
|--|--|---|---|-------------------------|------------------|--|--|
| 1) Grantee   |  |   | 2) Issue Date                             | This Action             |                  |  |  |
| -  | /larion Co   | unty  | ty February 12, 2020 AMENDMENT<br>FY 2020 |                         |                  |  |  |
| Street: 3  | 180 Cent   | er St. NE, Suite 2100   | St. NE, Suite 2100 3) Award Period        |                         |                  |  |  |
| City: S  | Salem  |   | From July 1, 2019 Through June 30, 2020   |                         |                  |  |  |
| State: (   | DR   | Zip Code: 97301   |   |                         |                  |  |  |
| 4) OHA Pul   | olic Healt   | h Funds Approved  |   |                         |                  |  |  |
| Р  | rogram   |   | Award<br>Balance                          | Increase/<br>(Decrease) | New<br>Award Bal |  |  |
| 6) Comme   | nts:   |   |   |                         |                  |  |  |
| PE07   | Initial S  | FY20: \$36,277 is for the period of 7/1   | /19 to 12/31/19 and must h                | e spent by 12/31/       | 19               |  |  |
| PE07   | 7/2019   | : Funding period 07/01/19 - 12/31/19 -<br>9. Funding period 01/01/20 - 06/30/20   | - \$58,975. A minimum of \$3              |                         |                  |  |  |
| PE12   | 11/201   | 9: \$1,773 award increase for scholars  | hip funding for Oregon Pre                | pared or OR-Epi         |                  |  |  |
| PE13-01  | 8/2019   | Amending to add 2 months of fundin  | g (total award is now for Ju              | ly-November 201         | 9)               |  |  |
| PE13-01  | footnot  | 9: Amending award total to \$121,420<br>es and comments are void and replac   | ed by this one                            | · ·                     |                  |  |  |
| PE40-01  | Initial S  | SFY20: spend \$51,286 Nutrition Education, \$10,337 Breastfeeding Promotion by 9/30/19  |   |                         |                  |  |  |
| PE40-01  | July-Se  | 0: Deobligate \$2,651 of unspent funds based on Q1 R/E report, funding was limited to<br>September 2019 only. Deobligated amount will be added to PE40-02 award for October<br>June 2020. |   |                         |                  |  |  |
| PE40-02  | Initial S  | FY20: spend \$153,857 Nutrition Educ  | cation, \$31,011 Breastfeedi              | ng Promotion by 6       | 6/30/20          |  |  |
| PE40-02  | 10/201   | 9: \$120 award increase is to support (   | Certifier Academy Kick-Off                |                         |                  |  |  |
| PE40-02  |  | Increase of \$2,651 is from PE40-01   | •   |                         |                  |  |  |
| PE42-07  |  | : Deobligate \$27,815 of unspent funds<br>ot 2019 only.   | s based on Q1 R/E report, 1               | unding was limite       | d to             |  |  |
| PE42-09  | Sept 20  | : Deobligate \$1,572 of unspent funds<br>019 only.  | •   | -                       | to Jul-          |  |  |
| PE46-02  |  | Reducing award to \$0 and re-allocat  | •   | PE46-04                 |                  |  |  |
| PE46-03  |  | : State Funding for July 15, 2019 – Ju  |   |                         |                  |  |  |
| PE46-03  |  | Increase of \$1,012.55 is from PE46-  | -   |                         |                  |  |  |
| PE46-04  |  | : Federal Funding for July 1 – July 14,   | -   |                         |                  |  |  |
| PE46-04  | July-Se  | : Deobligate \$1,012.55 unspent funds<br>ptember 2019 only. Deobligated amo   | unt will be added to PE46-0               |                         | i to             |  |  |
|  | PE51 Initial SFY20: Estimated Award for July 1, 2019 - September 30, 2019  |   |   |                         |                  |  |  |
|  | PE51 12/2019: Deobligate \$30,923.05 ofunspent funds based on Q1 R/E report and funding limited to July-Sept 2019 only |   |   |                         |                  |  |  |
| PE51-02  | PE51-02 12/2019: Adding \$30,819 for the period of 10/01/19 to 6/30/20   |   |   |                         |                  |  |  |
| 7) Capital outlay Requested in this Action:<br>Prior approval is required for Capital Outlay. Capital Outlay is defined as an expenditure for equipment with<br>a purchase price in excess of \$5,000 and a life expectancy greater than one year. |  |   |   |                         |                  |  |  |
| PROGF  | RAM  | AM ITEM DESCRIPTION COST APPROV   |   |                         |                  |  |  |
|  |  |   |   |                         |                  |  |  |
|  |  |   |   |                         |                  |  |  |

#### **OHA - 2019-2021 INTERGOVERNMENTAL AGREEMENT - FOR THE FINANCING OF PUBLIC HEALTH SERVICES**

### Attachment B Information required by CFR Subtitle B with guidance at 2 CFR Part 200

# PE40-01: WIC NSA: July - September

Funding Information Table

| <u> </u>            |                            |                     |                         |                     | -            |
|---------------------|----------------------------|---------------------|-------------------------|---------------------|--------------|
| Federal Aw ard Ider | ntification Number (FAIN): | N/A                 | N/A                     | N/A                 |              |
|                     | Federal Aw ard Date:       | 3/29/2019           | 3/29/2019               | 3/29/2019           |              |
|                     | Performance Period:        | 10/1/2018-9/30/2019 | 10/1/2018-9/30/2019     | 10/1/2018-9/30/2019 |              |
| Fe                  | deral Aw arding Agency:    | FNS USDA            | FNS USDA                | FNS USDA            |              |
|                     | CFDA Number:               | 10.557              | 10.557                  | 10.557              |              |
|                     | CFDA Name:                 | WIC NSA Grant       | WIC NSA Grant           | WIC NSA Grant       |              |
|                     | Total Federal Aw ard:      | \$22,420,304        | \$22,420,304            | \$22,420,304        |              |
|                     | Project Description:       | WIC Admin Expenses  | WIC Nutrition Education | WIC Breastfeeding   |              |
|                     | Aw arding Official:        | USDA Western Region | USDA Western Region     | USDA Western Region |              |
|                     | Indirect Cost Rate:        | 17.86%              | 17.86%                  | 17.86%              |              |
| Research            | and Development (Y/N):     | No                  | No                      | No                  |              |
|                     | PCA:                       | 52880               | 52882                   | 52881               |              |
|                     | INDEX:                     | 50331               | 50331                   | 50331               |              |
| Agency/Contractor   | DUNS                       | Amount              | Amount                  | Amount              | Total FY 202 |
| Marion              | 50973718                   | \$192,791           | \$50,756                | \$10,231            | \$253,777    |
|                     |                            |                     |                         |                     |              |

# PE40-02: WIC NSA: October - June

Funding Information Table

|                       |                          |                       |                         |                       | ī            |
|-----------------------|--------------------------|-----------------------|-------------------------|-----------------------|--------------|
| Federal Aw ard Identi | ification Number (FAIN): | N/A                   | N/A                     | N/A                   |              |
|                       | Federal Aw ard Date:     | 9/1/2019              | 9/1/2019                | 9/1/2019              |              |
|                       | Performance Period:      | 10/01/2019-09/30/2020 | 10/01/2019-09/30/2020   | 10/01/2019-09/30/2020 |              |
| Fed                   | eral Aw arding Agency:   | FNS,USDA              | FNS,USDA                | FNS,USDA              |              |
|                       | CFDA Number:             | 10.557                | 10.557                  | 10.557                |              |
|                       | CFDA Name:               | WIC NSA Grant         | WIC NSA Grant           | WIC NSA Grant         |              |
|                       | Total Federal Aw ard:    | \$15,000,000          | \$6,000,000             | \$4,500,000           |              |
|                       | Project Description:     | WIC Admin Expenses    | WIC Nutrition Education | WIC Breastfeeding     |              |
|                       | Aw arding Official:      | FNS Western Region    | FNS Western Region      | FNS Western Region    |              |
|                       | Indirect Cost Rate:      | 17.86%                | 17.86%                  | 17.86%                |              |
| Research a            | and Development (Y/N):   | No                    | No                      | No                    |              |
|                       | PCA:                     | 52880                 | 52882                   | 52881                 |              |
|                       | INDEX:                   | 50331                 | 50331                   | 50331                 |              |
| Agency/Contractor     | DUNS                     | Amount                | Amount                  | Amount                | Total FY 202 |
| Marion                | 50973718                 | \$586,523             | \$154,411               | \$31,122              | \$772,056    |

| Agency/Contractor | DUNS                            | Amount                                |  |  |
|-------------------|---------------------------------|---------------------------------------|--|--|
|                   | INDEX:                          | 50336                                 |  |  |
|                   | PCA:                            | 52272                                 |  |  |
| Rese              | earch and Development (Y/N):    | No                                    |  |  |
|                   | Indirect Cost Rate:             | 10%                                   |  |  |
|                   | Aw arding Official:             | Carolyn Gleason                       |  |  |
|                   | Project Description:            | Maternal and Child Health<br>Services |  |  |
|                   | Total Federal Aw ard:           | \$4,694,162                           |  |  |
|                   | CFDA Name:                      | MCH Title V Block Grant               |  |  |
|                   | CFDA Number:                    | 93.994                                |  |  |
|                   | Federal Aw arding Agency:       | DHHS/HRSA                             |  |  |
|                   | Performance Period:             | 10/01/2018-09/30/2020                 |  |  |
|                   | Federal Aw ard Date:            | 4/2/2019                              |  |  |
| Federal Aw arc    | d Identification Number (FAIN): | B04MC32566                            |  |  |
| <u>Fi</u>         | Funding Information Table       |                                       |  |  |

# PE42-07: MCAH Title V (July-Sept)

Marion

Funding Information Table

### PE42-09: MCAH Oregon Mothers Care Title V (July-Sept) Funding Information Table

50973718

| <u> </u>                                     | <u></u>                   |
|--|---------------------------|
| Federal Aw ard Identification Number (FAIN): | B04MC32566                |
| Federal Aw ard Date:                         | 4/2/2019                  |
| Performance Period:                          | 10/01/2018-09/30/2020     |
| Federal Aw arding Agency:                    | DHHS/HRSA                 |
| CFDA Number:                                 | 93.994                    |
| CFDA Name:                                   | MCH Title V Block Grant   |
| Total Federal Aw ard:                        |                           |
|  | Maternal and Child Health |
| Project Description:                         | Services                  |
| Aw arding Official:                          | Carolyn Gleason           |
| Indirect Cost Rate:                          | 10%                       |
| Research and Development (Y/N):              | No                        |
| PCA:   | 52272                     |

52272

\$4,513

|                   | INDEX:   | 50336  |
|-------------------|----------|--------|
| Agency/Contractor | DUNS     | Amount |
| Marion            | 50973718 | \$432  |

| Funding Information Table                    |                          |  |
|--|--------------------------|--|
| Federal Aw ard Identification Number (FAIN): | FPHPA006442              |  |
| Federal Aw ard Date:                         | 3/29/2019                |  |
| Performance Period:                          | 04/01/2019-3/31/2020     |  |
| Federal Aw arding Agency:                    | DHHS                     |  |
| CFDA Number:                                 | 93.217                   |  |
| CFDA Name:                                   | Family Planning Services |  |
| Total Federal Aw ard:                        | \$3,100,000              |  |
| Project Description:                         | Oregon Reproductive      |  |
| Aw arding Official:                          | Reyna Jesus              |  |
| Indirect Cost Rate:                          | 17.15%                   |  |
| Research and Development (Y/N):              | No                       |  |
| PCA:   | 52844                    |  |
| INDEY  | 50333                    |  |

# PE46-04: RH Community Participation & Access Federal

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