



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

PROGRAM SERVICES CONTRACT

This contract is entered into by and between the State of Missouri, Department of Health and Senior Services (Department/state agency) and the below named entity/individual (Contractor). The contract consists of the contract signature page, the scope of work; any attachments referenced and incorporated herein; the terms and conditions; and any written amendments made in accordance with the provisions contained herein. This contract expresses the complete agreement of the parties. By signing below, the Contractor and Department agree to all the terms and conditions set forth in this contract.

To the extent that this contract involves the use, in whole or in part, federal funds, the signature of the Contractor's authorized representative on the contract signature page indicates compliance with the Certifications contained in Attachment A which is attached hereto and is incorporated by reference as if fully set forth herein.

Tracking # 48113	Contract Title: CHILD CARE HEALTH CONSULTATION	
Contract Start: 10/1/2019	Contract End: 9/30/2021	Questions/Please Contact: PROCUREMENT UNIT @ (573)751-6471
Contract #: DH200048113		Amend #: 01

PLEASE VERIFY/COMPLETE - TYPE OR PRINT - SIGNATURE REQUIRED

NAME OF ENTITY/INDIVIDUAL (Contractor) CITY OF COLUMBIA	
DOING BUSINESS AS (DBA) NAME	
MAILING ADDRESS 701 EAST BROADWAY P O BOX 6015	
CITY, STATE, and ZIP CODE COLUMBIA MO 65205	
REMIT TO (PAYMENT) ADDRESS (if different from above)	
CITY, STATE, and ZIP CODE	
CONTACT PERSON	EMAIL ADDRESS
PHONE NUMBER	FAX NUMBER
TAXPAYER ID NUMBER (TIN) *****0810	DUNS NUMBER 071989024
CONTRACTOR'S AUTHORIZED SIGNATURE	DATE
PRINTED NAME	TITLE
DEPARTMENT OF HEALTH AND SENIOR SERVICES DIRECTOR OF DIVISION OF ADMINISTRATION OR DESIGNEE SIGNATURE	DATE

AMENDMENT # 01 TO CONTRACT DH200048113

CONTRACT TITLE: Child Care Health Consultation

CONTRACT PERIOD: October 1, 2020 through September 30, 2021

The Department of Health and Senior Services hereby exercises its option to renew the above referenced contract.

In addition, the Department of Health and Senior Services hereby amends the above-referenced contract in accordance with the following:

1. Delete paragraph 1.1 in its entirety and replace with revised paragraph 1.1 as follows:
 - 1.1 The contract amount shall not exceed \$14,113.98 for the period of October 1, 2020 through September 30, 2021.

2. Delete paragraph 2.3 in its entirety and replace with revised paragraph 2.3 as follows:
 - 2.3 To assist the Missouri Department of Health and Senior Services, Section for Women's Health, hereinafter Department or state agency, in achieving standards according to the Caring for Our Children National Health and Safety Performance Standards: Guidelines for Early Care and Education Programs; which outlines the Child Care Health Consultant role and the guiding principles of ensuring all children have the ability to thrive in safe and healthy environments.

3. Delete paragraph 5.1 in its entirety and replace with revised paragraph 5.1 as follows:
 - 5.1 The Department will reimburse the Contractor for an amount not to exceed the total contract amount for only the allowable costs in the budget categories stated in Exhibit 2, Budget Page, as attached hereto and incorporated by reference as if fully set forth herein.
 - 5.1.1 The Contractor shall submit the Budget Page (Exhibit 2) with the signed contract.

4. Delete paragraph 5.5.2 in its entirety and replace with revised paragraph 5.5.2

- 5.5.2 The Contractor shall not bill the Department for indirect cost that exceed the amounts on the Budget Page (Exhibit 2).
5. Delete paragraph 6.3 in its entirety and replace with revised paragraph 6.3 as follows:
- 6.3 The Contractor shall submit a Vendor Request for Payment Form and the Invoicing Tool for Calculating Indirect quarterly in the months of January, April, July, and October. The Vendor Request for Payment Form and the Invoicing Tool for Calculating Indirect shall be due by the fifteenth (15th) day of the month following the quarter in which the Contractor provided services under the contract. The Contractor shall perform services prior to invoicing the Department.
- a. First quarter runs October 1st through December 31st.
 - b. Second quarter runs January 1st through March 31st.
 - c. Third quarter runs April 1st through June 30th.
 - d. Fourth quarter runs July 1st through September 30th.
6. Delete Attachment D in its entirety.
7. Add Exhibit 2, Budget Page, as attached hereto and incorporated by reference as if fully set forth herein.

All other terms, conditions, and provisions of the contract shall remain the same and apply hereto.

Columbia-Boone County Department of Public Health and Human Services			
Completed by:	Trina Teacutter	Date Completed:	9/15/2020
Program Contact Email:	kennedi.barker@como.gov	Contact Phone Number:	573-874-7710
FFY 2021 Child Care Health Consultation Contract Budget			
Section A		MCH Amount	CCDF Amount
Total Allowed Contract Amount (see comment)	14,113.98	4943.05	9170.93
Operational Expenses:	13,227.90		
Personnel Services	8,769.44		
Fringe Benefits	2,718.53		
Travel	0.00		
Supplies	1,739.93		
Other	0.00		
Equipment (see comment below in Section B)	0.00		
Rental/Lease Costs (see comment below in Section B)	0.00		
Contractual	0.00		
Total Direct Costs	13,227.90		
Maximum Allowed Indirect	886.08		
CCHC Contract Total	14,113.98		
Surplus/Deficit	0.00		
			Unallowed Cost for Indirect Computation
Section B			
Total Budgeted Costs	14,113.98		
Total Budgeted Equipment Costs	0.00		0.00
Equipment is defined as Tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the contractor, or \$5,000.			
Total Budgeted Rental/Lease Costs	0.00		0.00
Subcontractor Budgets			
Subcontract #1	0.00		0.00
Subcontract #2	0.00		0.00
Subcontract #3	0.00		0.00
Subcontract #4	0.00		0.00
Subcontract #5	0.00		0.00
Total Contractual	0.00		0.00
Section C		CCDF funds will be expended first due to fund end dates	
10% MTDC and 5% Calculated Indirect Cost			
Modified Total Direct Costs (MTDC) excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, and participant support costs or the portion of each contractual costs in excess of \$25,000.			
Allowed Total Cost for the Calculation of Indirect Costs (Total excludes all items noted in Section B above)		13,227.90	
Allowed Rate for MCH		10%	
Allowed Costs for the Calculation of Indirect MCH		\$4,493.68	
Maximum Allowed Indirect Costs for MCH		\$449.37	
Allowed Rate for CCDF		5%	
Allowed Costs for the Calculation of Indirect CCDF		\$8,734.22	
Maximum Allowed Indirect Costs for CCDF		\$436.71	
Maximum Allowed Indirect Total		\$886.08	

The Contractor may choose to take less than the allowed MTDC indirect (10%/5%). If taking less than 10%/5% split MTDC for indirect please enter the percent into cells J39 and J42.

Columbia-Boone County Department of Public Health and Human Services	
FFY 2021 Child Care Health Consultation Contract Budget Narrative/Justification	
Personnel Services	Kennedi Barker, RN (Public Health Nurse) \$23.83 (base salary) per hour for planning, conducting and documenting provider training, consultations, or children's health promotions (8 hours per week for 40 weeks per year). Trina Teacutter, RN (Nursing Supervisor), Christy Thompson, RN (Public Health Nurse), Gayanna Kinkade-Bohlmeyer, RN (Public Health Nurse), Buffy Wheeler, RN (Public Health Nurse), Michele Shull, RN (Public Health Nurse), at \$23.83 (base salary) per hour for provision of First Aid/CPR training (total of 8 hours per month for 6 months per year).
Fringe Benefits	Fringe Benefits at 31% hourly pay
Travel	
Equipment	
Rental/Lease	
Supplies	Manikin supplies for CPR classes, CPR cards for class participants, supplies in support of programming such as books or games for child care providers to use at their facilities.
Other	
Contractual	



CONTRACT FUNDING SOURCE(S)

The Contract Funding Source(s) identifies the total amount of funding and federal funding source(s) expected to be used over the life of this contract. The CFDA number is the pass-through identification number for your Schedule of Expenditures of Federal Awards (SEFA), if one is required. You may reconcile your financial records to actual payment documents by going to the vendor services portal at <https://www.vendorservices.mo.gov/>. If the funding information is not available at the time the contract is issued, the Contractor will be notified in writing by the Department. Please retain this information with your official contract files for future reference.

Tracking #	48113	State: 0%	\$0.00	Federal: 100%	\$28,012.12
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Contract Title: CHILD CARE HEALTH CONSULTATION
Contract Start: 10/1/2019 **Contract End:** 9/30/2021 **Amend#:** 01 **Contract #:** DH200048113
Vendor Name: CITY OF COLUMBIA

CFDA: 93.575 **Research and Development:** N
CFDA Name: CHILD CARE AND DEVELOPMENT BLOCK GRANT
Federal Agency: DEPARTMENT OF HEALTH AND HUMAN SERVICES / ADMINISTRATION FOR CHILDREN AND FAMILIES
Federal Award: 2001MOCCDF
Federal Award Name: CHILD CARE BLOCK GRANT DISCRETIONARY FUNDS
Federal Award Year: 2020 **DHSS #:** 20CCDF **Federal Obligation:** \$8,997.71

CFDA: 93.575 **Research and Development:** N
CFDA Name: CHILD CARE AND DEVELOPMENT BLOCK GRANT
Federal Agency: DEPARTMENT OF HEALTH AND HUMAN SERVICES / ADMINISTRATION FOR CHILDREN AND FAMILIES
Federal Award: *
Federal Award Name: CHILD CARE BLOCK GRANT DISCRETIONARY FUNDS
Federal Award Year: 2021 **DHSS #:** 21CCDF **Federal Obligation:** \$9,170.93

CFDA: 93.994 **Research and Development:** N
CFDA Name: MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT TO THE STATES
Federal Agency: DEPARTMENT OF HEALTH AND HUMAN SERVICES / HEALTH RESOURCES AND SERVICES ADMINISTRATION
Federal Award: 1B04MC33849-01, 6B04MC33849-01
Federal Award Name: MATERNAL AND CHILD HEALTH SERVICES
Federal Award Year: 2020 **DHSS #:** 20MCH **Federal Obligation:** \$4,900.43

CFDA: 93.994 **Research and Development:** N
CFDA Name: MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT TO THE STATES
Federal Agency: DEPARTMENT OF HEALTH AND HUMAN SERVICES / HEALTH RESOURCES AND SERVICES ADMINISTRATION
Federal Award: *
Federal Award Name: *
Federal Award Year: 2021 **DHSS #:** 21MCH **Federal Obligation:** \$4,943.05

*** The Department will provide this information when it becomes available.**

Project Description:

To support health consultation services offered by the Local Public Agency and to enhance child care health, safety and nutrition practices in order to improve the health status and ensure safety of children in child care.