

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 # 46149	Contract Title: TEEN OUTREACH PROGRAM (TOP)	
Contract Start: 10/1/2018	Contract End: 9/30/2020	Questions/Please Contact: PROCUREMENT UNIT @ (573)751-6471
Contract #: AOC19380180		Amend #: 01

PLEASE VERIFY/COMPLETE - TYPE OR PRINT - SIGNATURE REQUIRED

NAME OF ENTITY/INDIVIDUAL (Contractor) CITY OF COLUMBIA	
DOING BUSINESS AS (DBA) NAME COLUMBIA/BOONE COUNTY PUBLIC HEALTH AND HUMAN SERVICES	
MAILING ADDRESS 1005 WEST WORLEY 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

Approved as to form:

City Counselor *[Signature]*

Amendment #01 To Contract #AOC19380180

CONTRACT TITLE: Teen Outreach Program

CONTRACT PERIOD: October 1, 2019 through September 30, 2020

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

In addition, the Department of Health and Senior Services hereby amends the following:

1. Delete Section 1.1 in its entirety and replace with revised Section 1.1 as follows:
 - 1.1 The contract amount shall not exceed \$45,000 for the period of October 1, 2019 through September 30, 2020.
2. Delete Attachment D and Attachment G in its entirety and replace with revised Attachment D and Attachment G, which is attached hereto and is 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.

PROGRAM SUMMARY

A Program Summary for the evidence-based teen pregnancy prevention program offered should be submitted using this form.

The offeror should list each time the entire multi-session evidence-based teen pregnancy prevention program is proposed to be conducted during the first contract period. For each entire multi-session evidence-based teen pregnancy prevention program, identify the facilitator, county/community, address/location, target population, and the proposed number of adolescents to be served.

Funding	Proposed Dates/ Timeframe	Facilitator	County/ Community Where Program is Implemented	Address/Location	Target Population (age, grade, race/ethnicity, designate specific age range, e.g. 12-14, 15-17, etc.)	Proposed Number of Adolescents Served
MCH	September 2019 – May 2020	Joshua Runnels Sarah Varvaro	Boone -Columbia	Battle High School	15-17	15
MCH	September 2019 – May 2020	Sarah Varvaro Joshua Runnels	Boone -Columbia	Rock Bridge High School	15-17	15
MCH	September 2019 – May 2020	Joshua Runnels Sarah Varvaro	Boone -Columbia	Hickman High School	15-17	15
MCH	September 2019 – May 2020	Joshua Runnels Health Educator: (TBD)	Boone -Columbia	Douglass High School	15-17	10
MCH	September 2019 – May 2020	Sarah Varvaro Health Educator: (TBD)	Boone - Harrisburg	Harrisburg High School	15-17	15
MCH	September 2019 – May 2020	Sarah Varvaro Joshua Runnels	Boone - Sturgeon	Sturgeon High School	15-17	15
MCH	September 2019 – May 2020	Joshua Runnels (TBD)	Boone -Columbia	Jefferson Middle School	12-14	15
MCH	September 2019 – May 2020	Sarah Varvaro Health Educator: (TBD)	Boone - Harrisburg	Harrisburg Middle School	12-14	15
					Totals	115

BUDGET

Budget Categories:	Justification:	Total:
Personnel Costs (hourly wage, salaries, and fringe benefits)	(List personnel; Specify actual hours or percentage spend on evidence-based teen pregnancy prevention program for each position) To support program coordination, management, and implementation. -TOP facilitator for 4 TOP clubs (14hrs per week). -TOP coordinator time provided in-kind. -A (.625 FTE) TOP facilitator for the remaining clubs is funded through another funding source (Boone County Children Services).	\$21,087
Travel Expenses (mileage, transportation, lodging, meals)	(Include travel costs to contractor conference, meal, mileage, hotel costs for travel; any student transportation costs, etc) - Van rentals for service projects and club events - Mileage reimbursement for facilitators - Travel, lodging, and meals for training trips for facilitators	\$1,850
Education Program Costs (curriculum materials, registration/ training fees, background checks, supplies, etc)	(Include supplies/food for meetings, educational materials, and other costs for club) For program implementation supplies including - Club supplies (journals, flip charts, markers, etc) - Lesson materials - Weekly snacks - Service event costs - End of the year recognition event	\$4,972
Other Subcontractor Costs (Facilitators to implement programs, etc.)	Supports CHALIS staff (1 trained facilitator) to facilitate or co-facilitate 6 clubs	\$13,000
Subtotal of all Budget Categories Above/Direct Costs		\$40,909
Indirect Costs	(Not to exceed 10% of the direct contract costs <u>billed</u> .)	\$4,091
Guaranteed not-to-exceed total annual price		\$45,000



CONTRACT FUNDING SOURCE(S)

The Contract Funding Source(s) is supplemental information the Department is required to provide the Contractor when issuing a contract or amendment that will be funded by federal sources. The document identifies the total amount of funding and the federal funding source(s) expected to be used over the life of this contract. For the specific amount for a contract period, refer to the contract and/or applicable amendments. If the funding information is not available at the time the contract is issued or the information below changes, the Contractor will be notified in writing by the Department. Please retain this information with your official contract files for future reference.

Tracking #	46149	State: 0%	\$0.00	Federal: 100%	\$90,000.00
-------------------	-------	------------------	--------	----------------------	-------------

Contract Title: TEEN OUTREACH PROGRAM (TOP)

Contract Start: 10/1/2018 **Contract End:** 9/30/2020 **Amend#:** 01 **Contract #:** AOC19380180

Vendor Name: CITY OF COLUMBIA

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: 1B04MC32553-01, 6B04MC32553-01
Federal Award Name: MATERNAL AND CHILD HEALTH SERVICES
Federal Award Year: 2019 **DHSS #:** 19MCH **Federal Obligation:** \$45,000.00

CFDA: N/A **Research and Development:** *
CFDA Name: *
Federal Agency: *
Federal Award: *
Federal Award Name: *
Federal Award Year: * **DHSS #:** ZZZ-PENDING FOA **Federal Obligation:** \$45,000.00

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

Project Description:

To implement the Teen Outreach Program (TOP) evidence-based teen pregnancy prevention program.