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.

Tracking #	**Contract Title:**	
56957	DISEASE INTERVENTION SPECIALIST WORKFORCE PROGRAM	
Contract Start:	**Contract End:**	**Questions/Please Contact:**
1/1/2025	2/28/2026	PROCUREMENT UNIT @ (573)751-6471
Contract #:		**Amend #:**
DH250056957		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)		UEI NUMBER
*********		WZR4KM9CBTV3
CONTRACTOR'S AUTHORIZED SIGNATURE		DATE
PRINTED NAME		TITLE
De'Carlon Seewood		City Manager
DEPARTMENT OF HEALTH AND SENIOR SERVICES DIRECTOR OF DIVISION OF ADMINISTRATION OR DESIGNEE SIGNATURE		DATE

Approved as to form:

Nancy Thompson, City Counselor

AMENDMENT #01 TO CONTRACT DH250056957

CONTRACT TITLE: **Disease Intervention Specialist Workforce Program**

CONTRACT PERIOD: **January 1, 2025, through February 28, 2026**

The Department of Health and Senior Services hereby extends the above referenced contract through February 28,2026 and increases the above referenced contract; therefore Section 1.1 is hereby deleted in its entirety and replaced with revised Section 1.1 as follows:

1.1 The contract amount shall not exceed $467,910.12 for the period of January 1, 2025, through February 28,2026.

In addition, the Department of Health and Senior Services desires to amend the above-referenced contract in accordance with the following:

1. Delete Attachment D in its entirety and replace with revised Attachment D, which is attached hereto and incorporated by reference as if fully set forth herein.

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

Columbia Boone Co Health Department			
Completed By:	Tracey Bathe	Date Completed:	10/3/2025
Contact Email:	tracey.bathe@como.gov	Contact Phone Number:	573-817-6402

DIS Supplemental Contract Budget

Section A

Total Allowed Contract Amount (see comment)	467,910.12
Operational Expenses:	
Personnel Services	285,514.00
Fringe Benefits	114,352.00
Travel	16,339.50
Supplies	5,114.34
Other	4,053.00
Equipment (see comment below in Section B)	
Rental/Lease Costs (see comment below in Section B)	0.00
Contractual	0.00
Total Direct Costs	
Indirect (Administrative Cost)	42,537.28
Contract Total	467,910.12
Surplus/Deficit	0.00

Section B

			Unallowed Cost for Indirect Computation
Total Budgeted Costs	467,910.12		
Total Budgeted Equipment Costs			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		

Section C

10% MTDC Indirect (Administrative) 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 Cost for the Calculation of Indirect (Administrative) Costs *(Total excludes all items noted in Section B above)*	425,372.84
Allowed Rate	10%
Maximum Allowed Indirect (Administrative Costs) for Contract	42,537.28

The contractor is entitled to charge their negotiated rate. If you have an approved negotiated rate please contact (DIS Program Coordinator) as we will need to modify this document to allow the proper calculation of Indirect Cost. In lieu of using their federally negotiated indirect cost rate or if you do not have an approved federally negotiated rate, the contractor may opt to accept an indirect cost rate up to 10% of the modified total direct costs or the contractor may waive charging indirect costs. The alternative method cannot result in more indirect earnings for the contractor than their negotiated rate If taking less than 10% MTDC for indirect please enter the percent into cell J40.

Columbia Boone Co Health Department

DIS Supplemental Contract Budget
Budget Narrative/Justification

Personnel Services

1.0 FTE HIV/DIS Manager x 14 months =$ 98,329 ; 2.0 FTE DIS x 14 months x $70,810=$141,620; and 1.0 FTE Administration Tech x 14 months x$45,565 Total: $98,329 +$141,620 +$45,565= $**285,514**

Fringe Benefits

1.0 FTE HIV/DIS Manager x 14 months x $98,329 x .35 benefit rate =$ 34,415; 2.0 FTE DIS x 14 months x $141,620 x .39 benefit rate=$55,232; and 1.0 FTE Administration Tech x 14 months x $45,565 x .45 benefit rate=$20,505 Total: $34,415 +$55,232+$20,505= $110,152 plus Car Allowance for HIV/DIS Manager =$3000 and cell phone allowance for HIV/DIS Manager=$700 Total=$110,152 + $3500 + $700= $**114,352**

Travel

Mileage = .70 per mile x 16,999 miles = $ 11,899.5
All in DIS regional travel -includes overnight, per diem and mileage at $500 a trip per person x 3 DIS - 3 trips = $4500
Total=$11,899.5+ $4500= $**16,339.50**

Equipment

Rental/Lease

Supplies

Office supplies =$1000 per year, Other miscellaneous program supplies = $4114.34
Total cost = $1000 + $4114.34= **$5114.34**

Other

City cell phones = $45 each month x 2 DIS x 1 year = $1080; (.1 per page 5000 pages) = $500 printing; postage .58 x 2000 = $1,160; Software purchases= $1313 Total=$1080+$500+ $1,160+ $1313=$**4053.00**

Contractual

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 #	56957	**State:** 0%	$0.00	**Federal:** 100%	$467,910.12
Contract Title:	DISEASE INTERVENTION SPECIALIST WORKFORCE PROGRAM				
Contract Start:	1/1/2025	**Contract End:**	2/28/2026	**Amend#:** 01	**Contract #:** DH250056957
Vendor Name:	CITY OF COLUMBIA				

CFDA:	93.977	**Research and Development:**	N		
CFDA Name:	PREVENTIVE HEALTH SERVICES_SEXUALLY TRANSMITTED DISEASES CONTROL GRANTS				
Federal Agency:	DEPARTMENT OF HEALTH AND HUMAN SERVICES / CENTERS FOR DISEASE CONTROL AND PREVENTION				
Federal Award:	6NH25PS005142-03				
Federal Award Name:	STRENGTHENING STD PREVENTION AND CONTROL FOR HEALTH DEPARTMENTS (STD PCHD)				
Federal Award Year:	2021	**DHSS #:**	PS005142-03A	**Federal Obligation:**	$467,910.12

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

Project Description:

Sexually Transmitted disease Prevention and Control strategies and activities are to prevent and control chlamydia, gonorrhea, syphilis and other communicable diseases according to Center for disease Control Sexually Transmitted disease Prevention and Control grant.