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:				
50870	OVERDOSE DATA TO ACTION				
Contract Start:	Contract End:	Questions/Please Contact:			
9/1/2021	8/31/2023 PROCUREMENT UNIT @ (573)751-6471				
Contract #:		Amend #:			
DH220050870		01			

PLEASE VERIFY/COMPLETE - TYPE OR PRINT - SIGNATURE REQUIRED

NAME OF ENTITY/INDIVIDUAL (Contractor)							
CITY OF COLUMBIA							
DOING BUSINESS AS (DBA) NAME							
ON BEHALF OF COLUMIBIA/BOONE COUNTY HEALTH DEPARTMENT							
MAILING ADDRESS							
1005 WEST WORLEY		P O BOX 6015					
CITY, STATE, and ZIP CODE							
COLUMBIA	MO	65205-6015					
REMIT TO (PAYMENT) ADDRESS (if different from above	re)						
CITY, STATE, and ZIP CODE							
CONTACT PERSON		EMAIL ADDRESS					
PHONE NUMBER		FAX NUMBER					
TAXPAYER ID NUMBER (TIN)		UEI NUMBER	DUNS NUMBER				
*****0810		WZR4KM9CBTV3	071989024				
CONTRACTOR'S AUTHORIZED SIGNATURE		DATE					
1							
PRINTED NAME TITLE							
De'Carlon Seewood		City Manager					
DEPARTMENT OF HEALTH AND SENIOR SERVICES		DATE					
DIRECTOR OF DIVISION OF ADMINISTRATION OR DESIG	GNEE SIGNATURE						

APPROVED AS TO FORM:

p

Monday, September 26, 2022 MO 580-3017 (03-22) 10:27:49 AM

By: _____ Nancy Thompson, City Counselor

AMENDMENT #01 TO CONTRACT DH220050870

CONTRACT TITLE: Overdose Data to Action

CONTRACT PERIOD: September 1, 2022 through August 31, 2023

The Department of Health and Senior Services hereby exercises its option to renew 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 \$41,500.00 for the period of September 1, 2022 through August 31, 2023.

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

- 1. Add Section 1.5 in its entirety as follows:
 - 1.5 If the Contractor provides any "personal information" as defined in §105.1500, RSMo concerning an entity exempt from federal income tax under Section 501(c) of the Internal Revenue Code of 1986, as amended, the Contractor understands and agrees that it is voluntarily choosing to seek a state contract and providing such information for that purpose. The state will treat such personal information in accord with §105.1500, RSMo.
- 2. Delete Attachments B, C, D, and E in their entirety and replace with revised Sections B, C, D, and E, which are attached hereto and are incorporated as if fully set forth herein.

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

SUBRECIPIENT SPECIAL CONDITIONS

- 1. The Department of Health and Senior Services has determined that this contract is subrecipient in nature as defined in the 2 CFR § 200.331. To the extent that this contract involves the use, in whole or in part, of federal funds, the Contractor shall comply with the following special conditions.
- 1.1 The Contractor shall comply with all applicable implementing regulations, and all other laws, regulations and policies authorizing or governing the use of any federal funds paid to the Contractor through this contract. The Contractor shall ensure compliance with U.S. statutory and public policy requirements, including but not limited to, those protecting public welfare, the environment, and prohibiting discrimination. See the Federal Agency's Notice of Grant Award at https://health.mo.gov/information/contractorresources/ for the terms and conditions of the federal award(s) governing this contract. Refer to the Contract Funding Source(s) report enclosed with the contract for a listing of the applicable federal award numbers.
- 1.2 In performing its responsibilities under this contract, the Contractor shall fully comply with the Office of Management and Budget (OMB) Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards (2 CFR Part 200, as applicable, including any subsequent amendments.
- 1.3 The Contractor shall send audit reports, other than their Single Audit Report, to the Department of Health and Senior Services, Division of Administration, P.O. Box 570, Jefferson City, MO 65102 each contract year. If a Single Audit is required, the Contractor must submit the Single Audit Report according to 2 CFR § 200.512. The Contractor shall return to the Department any funds disallowed in an audit of this contract.
- 1.4 The Contractor shall comply with the public policy requirements as specified in the Department of Health and Human Services (HHS) Grants Policy Statement which is incorporated herein as if fully set forth.

 http://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf
- 1.5 The Contractor shall be responsible for any disallowances, questioned costs, or other items, including interest, not allowed under the federal award or this contract. The Contractor shall return to the Department any funds disallowed within ninety days of notification by the Department to return such funds.
- 1.6 The Contractor shall notify the Department in writing within 30 days after a change occurs in its primary personnel involved in managing this contract.

SUBRECIPIENT SPECIAL CONDITIONS

- 1.7 The Contractor shall notify the Department in writing of any violation of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting federal monies under this contract. Failure by the Contractor to disclose such violations may result in the Department taking action as described in 2 CFR § 200.339 Remedies for Noncompliance.
- 1.8 The Contractor shall comply with Trafficking Victims Protection Act of 2000 (22 U.S.C. Chapter 78), as amended. This law applies to any private entity. A private entity includes any entity other than a State, local government, Indian tribe, or foreign public entity, as defined in 2 CFR § 175.25. The subrecipient and subrecipients' employees may not:
- 1.8.1 Engage in severe forms of trafficking in persons during the period of time that the award is in effect;
- 1.8.2 Procure a commercial sex act during the period of time that the award is in effect; or
- 1.8.3 Use forced labor in the performance of the award or subawards under the award.
- 1.8.4 The Contractor must include the requirements of this paragraph in any subaward made to a private entity.
- 1.9 The Contractor shall comply with 37 CFR Part 401, "Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements," and any implementing regulations, as applicable.
- 1.10 A Contractor that is a state agency or agency of a political subdivision of a state and its contractors must comply with Section 6002 of the Solid Waste Disposal Act (42 U.S.C. § 6962), as amended by the Resource Conservation and Recovery Act (P.L. 94-580). The requirements of Section 6002 relate solely to procuring items designated in the guidelines of the Environmental Protection Agency (EPA) at 40 CFR Part 247.
- 1.11 The Contractor shall provide its Unique Entity Identifier (UEI) number to the Department. If the Contractor is an exempt individual as per 2 CFR § 25.110(b), the Contractor shall notify the Department of its exemption. Pursuant to 2 CFR Part 25, no entity may receive a subaward unless the entity has provided its UEI number. The Department shall withhold the award of this contract until the Contractor submits the UEI number to the Department and the Department has verified the UEI number.

SUBRECIPIENT SPECIAL CONDITIONS

- 1.12 Equipment
- 1.12.1 Title to equipment purchased by the Contractor for the purposes of fulfilling contract services vests in the Contractor upon acquisition, subject to the conditions that apply as set forth in 2 CFR § 200.313. The Contractor must obtain written approval from the Department prior to purchasing equipment with a cost greater than \$1,000. The repair and maintenance of purchased equipment will be the responsibility of the Contractor. Upon satisfactory completion of the contract, if the current fair market value (FMV) of the equipment purchased by the Contractor is less than \$5,000, the Contractor has no further obligation to the Department. The Contractor may sell or retain items it purchased with a current FMV greater than \$5,000, but the Contractor may be required to reimburse the Department for costs up to the current value of the equipment.
- 1.12.2 Equipment purchased by the Department and placed in the custody of the Contractor shall remain the property of the Department. The Contractor must ensure these items are safeguarded and maintained appropriately, and return such equipment to the Department at the end of the program.

September 1, 2022 through August 31, 2023

Attachment C

LPHA Contractor: Columbia Boone County Public Health and Human Services

PROBLEM	CURRENT CAPACITY	OBJECTIVE(s)	ACTIVITIES	PROPOSED OUTCOMES
STATEMENT	(BASELINE MEASURE)			
EPICC (Engaging Patients in Care Coordination) is a regional partnership that links overdose survivors to treatment services. However, participation from the Columbia/Boone County Department of Public Health and Human Services (PHHS) decreased during the COVID-19 pandemic.	Once the effects of the COVID-19 pandemic began to wane, EPICC partners resumed meeting regularly to discuss their work. PHHS Staff have regularly attended these meetings since December 2021.	Enhance the partnership between PHHS and EPICC by attending EPICC meetings and continuing internal PHHS meetings.	PHHS Staff continue to attend EPICC monthly board meetings. (This activity meets contract deliverable 1 & 4a)	PHHS Staff will attend 80% of EPICC board meetings between September 2022 and August 2023.
PROBLEM STATEMENT	CURRENT CAPACITY (BASELINE MEASURE)	OBJECTIVE(s)	ACTIVITIES	PROPOSED OUTCOMES
EPICC links overdose survivors to treatment after they are referred by EMS, police, or hospitals. However, hospitals referrals decreased during the COVID-19 pandemic.	EPICC referrals from local hospital systems decreased during the COVID-19 pandemic and have continued to be less robust than anticipated.	PHHS Staff will continue to enhance referrals to EPICC.	PHHS, as part of Boone County Overdose Response Coalition, will distribute printed leave-behind materials to Boone County first responders that provide information about EPICC services. (This activity meets contract deliverable 4a, 4d &4e)	By August 2023, EPICC will double referral load from numbers reported June 2022.

September 1, 2022 through August 31, 2023

Attachment C

PROBLEM STATEMENT	CURRENT CAPACITY (BASELINE MEASURE)	OBJECTIVE(s)	ACTIVITIES	PROPOSED OUTCOMES
The landscape of drug use changes quickly and PHHS Staff need to continue taking part in opportunities to connect with other experts in the field to stay informed on the latest trends and solutions.	PHHS Staff need continued funding in order to attend conferences or summits related to drug use trends or evidence-based solutions.	PHHS Staff will attend at least one educational conference or national summit on overdose and addiction and use knowledge gained to inform a public awareness campaign.	PHHS will identify 2 staff members to attend each summit or conference. Designated PHHS Staff will register and attend summit(s)/conference(s). PHHS Staff attending summit(s)/conference(s) will report back to opioid convening groups on knowledge gained from the summit(s)/conference(s). (These activities meet contract deliverables 3 & 4e)	Staff will register for Rx and Illicit Drug Summit to attend in-person (or purchase Maximum Access Passes if appropriate).

September 1, 2022 through August 31, 2023

	September	i, 2022 unough Mugus	151, 2025	Attachment C
PROBLEM	CURRENT CAPACITY	OBJECTIVE(s)	ACTIVITIES	PROPOSED OUTCOMES
STATEMENT	(BASELINE MEASURE)			
The public is not aware of the risk of overdose or substance misuse in the community. Community members are not given information on a regular basis outlining how to recognize and respond to an overdose, or how to access resources for substance misuse prevention or treatment (e.g. overall, the community does not know how to access and use naloxone).	PHHS is currently running the OPIOID KIT demo project. This project partners with 5 local businesses to place a naloxone safety kit on the wall of a well-trafficked area in the business. The project aims to increase naloxone access in the community as well as provide educational opportunities for community members. Using QR codes, community members can access information about naloxone, signs of opioid overdose, general opioid knowledge, and how to treat an opioid overdose using naloxone. Current PHHS social media posts and traditional media stories have centered on health observance events (for example, Fentanyl Awareness Day and Mental Health Awareness Month, etc). Realizing the lack of knowledge and awareness, a greater use of all media sources is needed.	PHHS Staff will continue their awareness campaign, utilizing all viable means and sources of media. PHHS will continue to design messages to inform community members about how to identify and respond to an overdose as well as access resources to treatment.	 Expand the current naloxone safety kit project using local data to identify potential partners located near overdose incident sites. Share social media posts and physical ad materials for an awareness campaign, as well as distribute brochure with Boone County specific resources for opioid treatment. Cultivate links with traditional media to suggest stories and promote community action. (These activities meet contract deliverable 3) 	PHHS Staff will purchase 10 more naloxone safety kits and establish 10 more community partnerships with businesses who's owner(s) will agree to place a naloxone safety kit on the wall in a well-trafficked area by August 31, 2023. Informational flyers, poster, or other physical objects will be shared in 5 unique spaces (e.g. public bathrooms, public transportation, hotels, homeless shelters, business break rooms, etc.) PHHS will post information that aligns with Boone County Overdose Response Coalition regarding primary prevention, emergency response, harm reduction, treatment and/or recovery 2x per month (or more as information presents itself) September 2022 - August 2023.

September 1, 2022 through August 31, 2023

Attachment C
PROPOSED OUTCOMES
Contact 12 local women's health clinics and provide information about the EPICC referral program by August 2023.
Track number of referrals for pregnant women from EPICC during monthly EPICC board meetings through August 2023.
PROPOSED OUTCOMES
There exist over 20 pharmacy systems in Boone County.

PROBLEM STATEMENT Pregnant women with substance use disorders (SUD) should be linked to treatment as soon as the women and SUD are identified. However, there are little to no resources directed to this area of focus nor are	CURRENT CAPACITY (BASELINE MEASURE) There are currently little awareness or outreach efforts with local women's health clinics in place to provide rapid linkage for SUD treatment among pregnant women.	OBJECTIVE(s) Increase linkages to treatment to ensure local women's health clinics are aware of treatment and recovery services and supports.	ACTIVITIES Contact local women's health clinics to inform them of EPICC services and provide EPICC outreach materials. Collect data on number of pregnant women referred to EPICC services.	PROPOSED OUTCOMES Contact 12 local women's health clinics and provide information about the EPICC referral program by August 2023. Track number of referrals for pregnant women from EPICC
providers fully aware of these services.			(These activities meet contract deliverable #4c)	during monthly EPICC board meetings through August 2023.
PROBLEM STATEMENT	CURRENT CAPACITY (BASELINE MEASURE)	OBJECTIVE(s)	ACTIVITIES	PROPOSED OUTCOMES
Despite the standing order from the Governor of Missouri that allows Missouri residents to purchase naloxone without a prescription, local pharmacies have demonstrated a lack of awareness leading to barriers to access and increased stigma.	Local pharmacies seem unaware of details regarding the standing order in Missouri for naloxone. This leads to disjointed response by pharmacies resulting in confusion by community members and obstacles that limit easy access to naloxone for Boone County resident.	Increase pharmacies' awareness of naloxone standing order details. Better understanding will result in increased access and reduction of stigma.	PHHS staff members will contact local pharmacies to inquire about current pharmacy policy and procedures regarding naloxone standing order. PHHS Staff will offer educational services about standing order and trainings on overdose crisis, naloxone, and stigma reduction to contacted pharmacies.	There exist over 20 pharmacy systems in Boone County. PHHS Staff will reach out to at least 50% of the systems.

September 1, 2022 through August 31, 2023

Attachment C

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PROBLEM	CURRENT CAPACITY	OBJECTIVE(s)	(These activities meet contract deliverables #1 & 3) ACTIVITIES	PROPOSED OUTCOMES
STATEMENT	(BASELINE MEASURE)			
Stereotyping and prejudice fueled by lack of information in the general population continue to add to stigma regarding persons who live with SUD, treatment, and medication assisted treatment.	Language often used in the County regarding substance misuse is outdated and harmful.	PHHS Staff will work with members of Boone County Overdose Response Coalition to increase use of recovery-friendly language and reduce stigmatizing jargon.	Based on the stigma-reduction objectives of the Boone County Overdose Response Coalition's Goal Setting Workgroup, PHHS Staff will: • Raise awareness of the issue. • Increase the use of recovery-friendly language within the Coalition. • Reduce the use of stigmatizing language within the Coalition. PHHS efforts to work with Coalition members will influence the community atlarge. (This meets contract deliverables #3 & 4e)	As facilitator of bi-monthly Coalition meetings, designated PHHS Staff will: • Provide list of recovery- friendly language developed by NIDA (National Institute on Drug Abuse) with each meeting invitation. • Include statement encouraging use of recovery- friendly language at opening of every Coalition meeting. • Request all members take pre-survey September 2022 to self-report how often each member personally uses recovery-friendly language. • Request all Coalition members take follow-up surveys February 2023 and August 2023. • By August 2023, members will have increased self- reported use of recovery- friendly language by 50%.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES **Subrecipient Annual Financial Report**

1. Contractor Name and Complete Addre	SS				

2. Contract Number		3 Co	ntract Period (MI	M/DD/VV)	Contractor Identifying
2. Contract Number		-	From: To:		Number (optional)
5. UEI Number	6. EIN			7. Report	Type
				Something of the state of the s	Comment of the second
8. Transactions				**************************************	
Contract Expenditures:				····	·
8a. Total contract funds authorized	d:				
8b. Total expenditures:					
	_				
8c. Unspent balance of contract fu	nds (line a minus b):				\$0.00
Match Requirements (if require	ed by the contr	act):			
8d. Total match required:					
8e. Total match expenditures:		*******			
8f. Remaining match to be provide	d (line d minus e):	······································	######################################		\$0.00
9. Remarks: Attach any explanations dee	med necessary.				
10. Certification: By signing this repor accurate, and the expenditures, disbut	t, I certify to the sements and ca	best of my k	nowledge and b	pelief that the re	eport is true, complete, and
and conditions of the Federal Award. I	am aware that a	ny false, fict	itious, or fraudi	ulent information	on, or the omission of any
material fact, may subject me to crimin otherwise. (U.S. Code Title 18, Section	nal, civil or admin 1001 and Title 3	nistrative pe 1. Sections :	nalties for fraud 3729-3730 and 3	I, false stateme 8801-3812).	nts, false claims or
		,, 000		,.	
11a.		11b.		11c.	
Typed or Printed Name and Title of Authorized Certifying Telephone (Including Area Code) Email Official of the Contractor					dress
	100				
		-			
11d. Signature of Authorized Certifying C	fficial of the Cont	ractor		11e Date	e Report Submitted
				(MM/DD/Y)	

MO 580-3091 (3-2022)

		<u></u>	
Completed By:	Michelle Shikles and Heather Harla		6/30/2022
ontact Email: heather.harlan@como.gov		Contact Phone Number:	573-817-6404
C1! A	FFY2022 Overdose Data t	o Action Grant Contract	Budget
Section A			
	ract Amount (see comment)	41,500.00	
Operational Expense	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	21 001 50	
Personnel Service	ces	21,881.60	
Fringe Benefits		6,564.48	
Travel		3,864.25	
Supplies Other		1,300.00	
	amont balow in Section P)	4,116.94	
	nment below in Section B) (see comment below in Section B)	0.00	
Contractual	(see comment below in section b)	0.00	
Total Direct Costs		0.00	
Indirect (Administra	tive Cost)	3,772.73	
Contract Total	tive cost)	41,500.00	
Surplus/Deficit		0.00	
		3.00	
Section B			Unallowed Cost for Indirect Computation
Total Budgeted Cos	ts	41,500.00	
Total Budgated Co			
iviai buugetea Equ	ipment Costs	0.00	0.00
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Equipment is define more than one year established by the contractor Budgeted Remarks Subcontract #1 Subcontract #2 Subcontract #3 Subcontract #4 Subcontract #5 Total Contractual Section C 10% MTDC Indirect Modified Total Direct tuition remission, so in excess of \$25,000	ct (Administrative) Cost ct Costs (MTDC) excludes equipmen cholarships and fellowships, and par o. e Calculation of Indirect (Administrative) ce Calculation of Indirect (Administrative)	O.00 O.00 O.00 O.00 O.00 O.00 O.00 O.00	systems) having a useful life of of the capitalization level 0.00

The contractor is entitled to charge their negotiated rate. If you have an approved negotiated rate please contact Jennifer Harrison 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.

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 County Public Health and Human Services
FFY2022 Overdose Data to Action Grant Contract Budget Budget Narrative/Justification
Personnel Services
Heather Harlan, Coordinator - 832 hours X \$26.30/hour = \$21,881.60 (16 hours/week X 52 weeks of contract).
Fringe Benefits
Heather Harlan, Coordinator - fringe benefits calculated at 30% of hourly rate: \$7.89 X 832 hours = \$6,564.48
Travel
Registration fee for Rx Drug Abuse and Heroin Summit (Atlanta, GA) - \$625/person X 2 attendees = \$1,250; Travel to airport up to 250 miles round trip - \$0.625/mi X 250 mi = \$156.25; Roundtrip airfare from St. Louis to Atlanta - \$280/person X 2 attendees = \$560; lodging for summit attendees - \$163/night X 4 nights X 2 attendees = \$1,304; meal and incidental per diem for travel - \$59.40/day X 5 days X 2 attendees = \$594: total = \$3.864.25
Equipment
none.
Rental/Lease
none.
Supplies
Opioid safety kits = \$130 x 10 = \$1,300
Other

Social media awareness campaign utilizing Instagram, Snapchat, YouTube, etc \$2,116.94; printing awarene campaign materials including flyers, posters, brochures, pens etc \$2,000					
Contractual					



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 # 50870 State: 0% \$0.00 Federal: 100% \$83,000.00

Contract Title: OVERDOSE DATA TO ACTION

Contract Start: 9/1/2021 Contract #: DH220050870 8/31/2023 Amend#: 01 Contract End:

Vendor Name: CITY OF COLUMBIA

CFDA: 93.136 Research and Development: N

CFDA Name: INJURY PREVENTION AND CONTROL RESEARCH AND STATE AND COMMUNITY BASED PROGRAMS

Federal Agency: DEPARTMENT OF HEALTH AND HUMAN SERVICES / CENTERS FOR DISEASE CONTROL AND PREVENTION

5NU17CE925004-03 Federal Award:

Federal Award Name: **OVERDOSE DATA IN ACTION - NCIPC**

Federal Award Year: 2021 DHSS #: CE925004-03B **Federal Obligation:** \$83,000.00

Project Description:

The purpose of this contract is to achieve CDC's desired outcomes of decreasing rates of opioid misuse and opioid use disorder, increasing provision of evidence-based treatment for opioid use disorder, decreasing rates of ED visits due to misuse or opioid use disorder, and decreasing drug overdose death rates, including prescription and illicit opioid overdose death rates.

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