

# RESOLUTION No. 22-568

## OF THE BOARD OF SUPERVISORS OF THE COUNTY OF NEVADA

**RESOLUTION APPROVING THE EXECUTION OF AMENDMENT A1 TO GRANT AGREEMENT NUMBER 18-10879 WITH THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH (CDPH), CENTER FOR INFECTIOUS DISEASES, THROUGH THE RYAN WHITE HIV/AIDS PROGRAM (PART B) (RWHAP)/HIV CARE PROGRAM (HCP) AWARD WHICH INCREASES THE MAXIMUM AMOUNT FROM \$203,324 TO \$244,726 (AN INCREASE OF \$41,402) AND MODIFIES THE PROJECT REPRESENTATIVES FOR THE TERM OF APRIL 1, 2019 THROUGH MARCH 31, 2024 (RES 19-307)**

WHEREAS, Per Resolution 19-307, the Board of Supervisors approved Agreement Number 18-10879 with the California Department of Public Health (CDPH), Center for Infectious Diseases, through the Ryan White HIV/AIDS Program (Part B) (RWHAP)/HIV Care Program (HCP) Award, the Title II Ryan White CARE Act Program was created to help states, communities and families cope with the growing impact of the AIDS epidemic; and

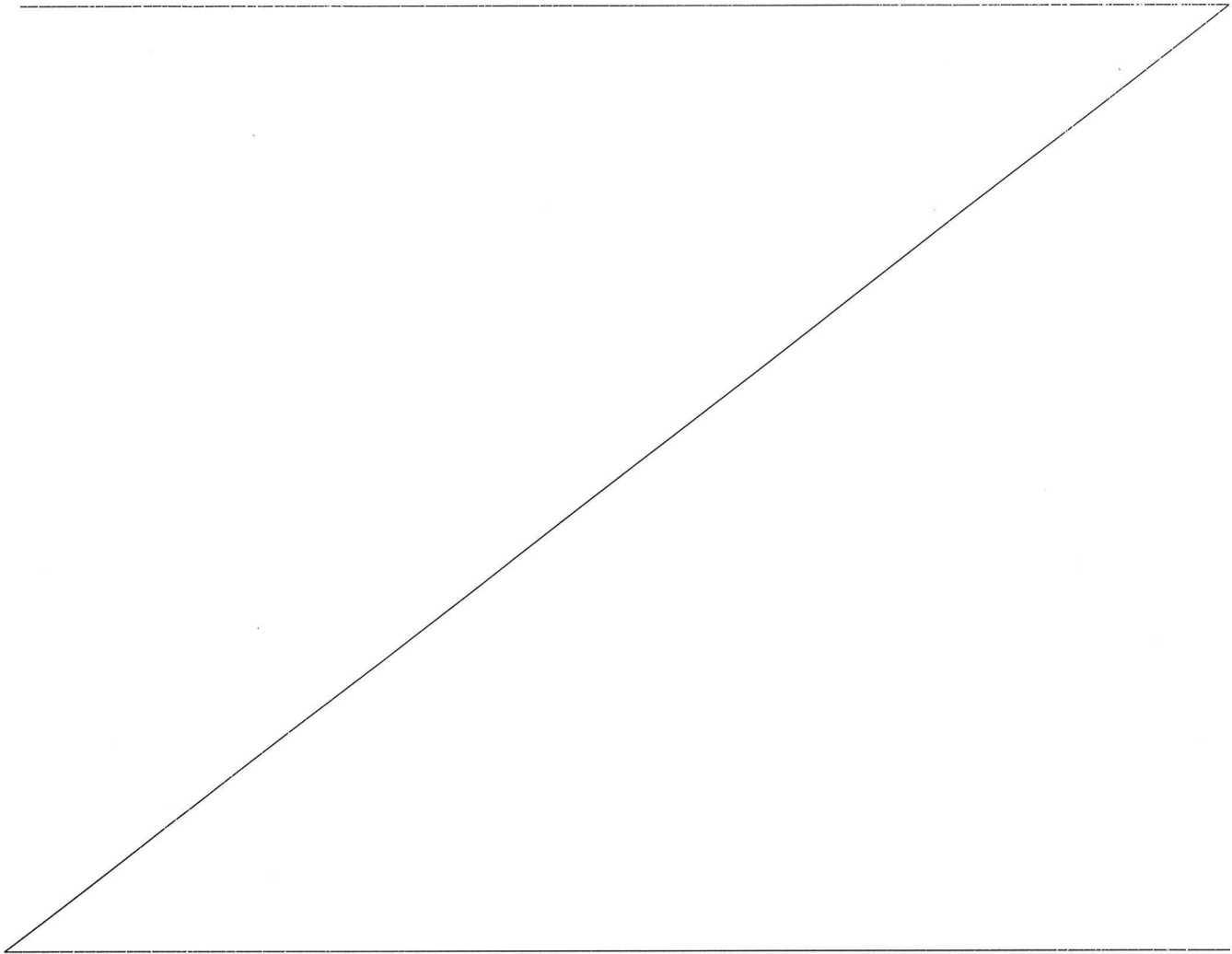
WHEREAS, the program is intended to fill in the gaps in care often faced by individuals with HIV/AIDS who are low-income and little or no insurance, by offering coordinated on-going health and support services to these individuals within the community; and

WHEREAS, the goals of CDPH/OA are: (1) to minimize new HIV infections; (2) to maximize the number of people with HIV who access appropriate care, treatment, support, and (3) reduce HIV/AIDS-related health disparities. CDPH/OA utilizes federal Health Resources Services Administration funds to provide support for HIV/AIDS services in local communities; and

WHEREAS, the County is in receipt of Amendment 18-10879, A1 to the Agreement which increases maximum award amount to \$244,726 and modifies the Project Representatives.

NOW, THEREFORE, BE IT HEREBY RESOLVED by the Board of Supervisors of the County of Nevada, State of California, that the Amendment A1 To Grant Agreement Number 18-10879 by the California Department of Public Health, Office of AIDS, pertaining to the HIV Care Program (HCP) Core Medical and Support Services and Minority AIDS Initiative (MAI) Outreach and Treatment Services in the maximum amount of \$244,726 for the term of April 1, 2019 through March 31, 2024, is hereby approved, and that the Chair of the Board of Supervisors be and is hereby authorized to execute the Amendment and all certifications required on behalf of the County of Nevada.

Funds to be deposited into revenue account: 1589-40102-492-2453/446700.



PASSED AND ADOPTED by the Board of Supervisors of the County of Nevada at a regular meeting of said Board, held on the 6<sup>th</sup> day of December, 2022, by the following vote of said Board:

- Ayes: Supervisors Heidi Hall, Edward Scofield, Dan Miller, Susan K. Hoek and Hardy Bullock.
- Noes: None.
- Absent: None.
- Abstain: None.

ATTEST:

JULIE PATTERSON HUNTER  
Clerk of the Board of Supervisors

By: 

  
Susan K. Hoek, Chair

12/6/2022 cc: PH\*  
AC\* (Hold)

2/1/2023 cc: PH\*  
AC\* (Release)

**CALIFORNIA Ryan White HIV/AIDS PROGRAM – Part B Program**

**Awarded By**

**THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH, hereinafter “Department”**

**TO**

**County of Nevada, hereinafter “Grantee”**

**Implementing the project, “HIV Care Program”, hereinafter “Project”**

**AMENDED GRANT AGREEMENT NUMBER 18-10879, A1**

The Department amends this Grant and the Grantee accepts and agrees to use the Grant funds as follows:

**AUTHORITY:** The Department has authority to grant funds for the Project under Health and Safety Code, Section 131085.

**PURPOSE FOR AMENDMENT:** The purpose of the Grant amendment is to: Increase the funding amount, and to modify Project Representatives. There are no additional changes to this grant.

**Amendments** are shown as: Text additions are displayed in **bold and underline**. Text deletions are displayed as strike through text (i.e., ~~Strike~~).

**AMENDED GRANT AMOUNT: this amendment** is to increase the grant by \$41,402 and is amended to read: The maximum amount payable under this Grant shall not exceed \$203,324 **244,726** (Two Hundred Forty-Four Thousand Seven Hundred Twenty Six Dollars).

**AMENDED STANDARD PROVISIONS:** The following exhibits are replaced in their entirety, attached, and made a part of this Grant by this reference:

Exhibit A, A1 Letter of Intent

Exhibit A1, A1 List of allocations

Exhibit B, A1 Budget Detail and Payment Provisions

**PROJECT REPRESENTATIVES.**

The Project Representatives during the term of this Grant will be:

<b>California Department of Public Health</b>	<b>County of Nevada</b>
Jessica Heskin, Chief  1616 Capitol Avenue, Suite 616, MS 7700 Sacramento, CA 95814  Telephone: (916) 449-5819 Fax: (916) 449-5959 Email: <a href="mailto:jessica.heskin@cdph.ca.gov">jessica.heskin@cdph.ca.gov</a>	Liz Matson <b>Toby Guevin</b> , Program Manager  500 Crown Point Circle, Suite 110 Grass Valley, CA 95945  Telephone: (530) 265-1717 Fax: Email: <a href="mailto:liz.matson_toby.guevin@co.nevada.ca.us">liz.matson_toby.guevin@co.nevada.ca.us</a> <u><a href="http://nevadacountyca.gov">nevadacountyca.gov</a></u>

Direct all inquiries to:

<b>California Department of Public Health</b>	<b>County of Nevada</b>
<del>Patricia Bittle</del> <b>Jessica Snow, HIV Care Program</b> Advisor  1616 Capitol Avenue, Suite 616, MS 7700 Sacramento, CA 95814  Telephone: (916) 449-5988 <b>5819</b> Fax: (916) 449-5959 Email: <del>patricia.bittle</del> <a href="mailto:jessica.snow@cdph.ca.gov">jessica.snow@cdph.ca.gov</a>	Liz Matson <b>Toby Guevin</b> , Program Manager  500 Crown Point Circle, Suite 110 Grass Valley, CA 95945  Telephone: (530) 265-1717 Fax: Email: <a href="mailto:liz.matson_toby.guevin@co.nevada.ca.us">liz.matson_toby.guevin@co.nevada.ca.us</a> <u><a href="http://nevadacountyca.gov">nevadacountyca.gov</a></u>

All payments from CDPH to the Grantee; shall be sent to the following address:

<b>Remittance Address</b>
County of Nevada FISCAL ID: 0000006820  Cashier – Judith Richert, Account Technician  500 Crown Point Circle, Suite 110 Grass Valley, CA 95945  Telephone: (530) 265-7256 Email: <a href="mailto:judith.richert@co.nevada.ca.us">judith.richert@co.nevada.ca.us</a>

Either party may make changes to the Project Representatives, or remittance address, by giving a written notice to the other party. Said changes shall not require an amendment to the agreement. Note: Remittance address changes will require the Grantee to submit a completed CDPH 9083 Governmental Entity Taxpayer ID Form or STD 204 Payee Data Record Form which can be requested through the CDPH Project Representatives for processing.

All other terms and conditions of this Grant shall remain the same.

IN WITNESS THEREOF, the parties have executed this Grant on the dates set forth below.

Executed By:

Date: 12/06/2022

*Susan Hoek*  
Susan Hoek (Dec 6, 2022 11:37 PST)

~~Richard Anderson~~ **Susan Hoek**, Chair  
Board of Supervisors  
County of Nevada  
500 Crown Point Circle, 110  
Grass Valley, CA 95945

Date: 1-13-23

*Javier Sandoval*

~~Joseph Torrez~~ **Javier Sandoval**, Chief  
Contracts Management Unit  
California Department of Public Health  
1616 Capitol Avenue, Suite 74.262  
P.O. Box 997377, MS 1800-1804  
Sacramento, CA 95899-7377



TOMÁS J. ARAGÓN, MD, DrPH  
 Director and State Public Health Officer

State of California—Health and Human Services Agency  
 California Department of Public Health



GAVIN NEWSOM  
 Governor

**Exhibit A, A1**  
 Letter of Intent

February 4, 2022

Liz Matson & Judith Richert  
 Nevada County Public Health  
 500 Crowne Point Circle, #110,  
 Grass Valley, CA 95945

Dear Liz & Judith,

The California Department of Public Health (CDPH), Center for Infectious Diseases, Office of AIDS (OA) is pleased to announce the intent to award funds to Nevada County for the Ryan White HIV/AIDS Program (Part B) (RWHAP)/HIV Care Program (HCP) and, if applicable, the Minority AIDS Initiative (MAI).

The goals of CDPH/OA are: (1) to minimize new HIV infections; (2) to maximize the number of people with HIV who access appropriate care, treatment, support, and (3) reduce HIV/AIDS-related health disparities. CDPH/OA utilizes federal Health Resources Services Administration funds to provide support for HIV/AIDS services in local communities (FAIN X0712778, DUNS 799150615, UEI KD2JSY6LNMW7, CFDA 93.917). As the State grantee for RWHAP, CDPH/OA allocates those funds for the administration of the HCP and MAI through grants with Local Health Jurisdictions and Community Based Organizations for the provision of medical and support services to low-income people living with HIV.

These funds will be available to the County of Nevada on a yearly basis from April 1, 2019 – March 31, 2024. The amount of funding allocated is on an annual basis through a non-competitive formula. Your maximum amount for the five-year grant period is \$244,726 for the purpose of serving persons living with HIV in the County of Nevada.

	Annual Amount for Years 1 to 3	Annual Amount for Years 4 to 5	Total Amount for Years 1 to 5
HIV Care Program	\$49,862	<b>\$47,570</b>	\$244,726
Minority AIDS Initiative	Not applicable	Not applicable	Not applicable
Emerging Communities	Not applicable	Not applicable	Not applicable
Housing Plus Project	Not applicable	Not applicable	Not applicable

This agreement is valid and enforceable only if sufficient funds are made available to the State by the United States Government for the fiscal years covered by the term of this Agreement. In addition, this Agreement is subject to any additional restrictions, limitations, or conditions enacted by the Congress or any statute enacted by the Congress which may affect the



provisions, terms, or funding of this Agreement in any manner. If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this program, the State shall have the option to either cancel this Agreement with no liability occurring to the State, or offer an agreement amendment to the Grantee to reflect the reduced amount.

The funds must be used to provide allowable services under RWHAP Part B. For guidance see the Scope of Work ([https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/HCPMAI%20SOWFINAL\\_Nov2018\\_ADA.pdf](https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/HCPMAI%20SOWFINAL_Nov2018_ADA.pdf)). All Grantees must adhere to the Scope of Work, and any subsequent revisions, along with all instructions, policy memorandums, or directives issued by CDPH/OA. CDPH/OA will make any changes and/or additions to these guidelines in writing and, whenever possible, notification of such changes shall be made 30 days prior to implementation.

In order to apply for these funds, you must return the required budget documents by March 4, 2022. The documents should be e-mailed to your assigned HIV Care Program Advisor.

If you have any questions, please feel free to contact me at [abel.martinez@cdph.ca.gov](mailto:abel.martinez@cdph.ca.gov).

Sincerely,

A handwritten signature in black ink, appearing to read 'Abel Martinez', with a stylized flourish at the end.

Abel Martinez, MPH  
Chief, Care Operations Unit  
Office of AIDS, California Department of Public Health

Ryan White HIV/AIDS Program - Part B						
Contractor Name	Year 1	Year 2	Year 3	Year 4	Year 5	Total
Alameda	<del>\$1,366,541</del> <b>\$1,366,542</b>	<del>\$1,366,541</del> <b>\$1,366,542</b>	<del>\$1,366,541</del> <b>\$1,366,542</b>	<del>\$1,366,541</del> <b>\$1,320,507</b>	<del>\$1,366,541</del> <b>\$1,320,507</b>	<del>\$6,832,707</del> <b>\$6,740,640</b>
Butte (Includes Glenn)	<del>\$172,438</del>	<del>\$172,438</del> <b>\$172,438</b>	<del>\$172,438</del> <b>\$172,438</b>	<del>\$172,438</del> <b>\$144,958</b>	<del>\$172,438</del> <b>\$144,958</b>	<del>\$733,472</del> <b>\$807,230</b>
Contra Costa	<del>\$614,187</del> <b>\$724,567</b>	<del>\$480,375</del> <b>\$611,187</b>	<del>\$480,375</del> <b>\$611,187</b>	<del>\$480,375</del> <b>\$588,268</b>	<del>\$480,375</del> <b>\$588,268</b>	<del>\$2,532,688</del> <b>\$3,123,477</b>
Humboldt (Includes Del Norte)	<del>\$160,401</del>	<del>\$136,166</del> <b>\$160,401</b>	<del>\$136,166</del> <b>\$160,401</b>	<del>\$136,166</del> <b>\$187,948</b>	<del>\$136,166</del> <b>\$187,948</b>	<del>\$704,064</del> <b>\$857,099</b>
Imperial	<del>\$153,036</del>	<del>\$80,356</del> <b>\$153,036</b>	<del>\$80,356</del> <b>\$153,036</b>	<del>\$80,356</del> <b>\$141,596</b>	<del>\$80,356</del> <b>\$141,596</b>	<del>\$401,775</del> <b>\$742,300</b>
Inyo	<del>\$876,916</del> <b>\$50,885</b>	<del>\$765,179</del> <b>\$56,917</b>	<del>\$765,179</del> <b>\$56,917</b>	<del>\$765,179</del> <b>\$80,356 \$0</b>	<del>\$765,179</del> <b>\$80,356 \$0</b>	<del>\$3,937,629</del> <b>\$164,719</b>
Kern	<del>\$876,914</del>	<del>\$66,226</del> <b>\$1,076,192</b>	<del>\$66,226</del> <b>\$1,171,815</b>	<del>\$66,226</del> <b>\$1,060,782</b>	<del>\$66,226</del> <b>\$1,060,782</b>	<del>\$360,637</del> <b>\$5,246,485</b>
Kings	<del>\$85,732</del>	<del>\$116,601</del> <b>\$85,732</b>	<del>\$116,601</del> <b>\$85,732</b>	<del>\$116,601</del> <b>\$65,423</b>	<del>\$116,601</del> <b>\$65,423</b>	<del>\$733,472</del> <b>\$388,042</b>
Long Beach	<del>\$1,347,497</del>	<del>\$1,104,424</del> <b>\$1,347,497</b>	<del>\$1,104,424</del> <b>\$1,347,497</b>	<del>\$1,104,424</del> <b>\$1,328,947</b>	<del>\$1,104,424</del> <b>\$1,328,947</b>	<del>\$6,765,194</del> <b>\$6,700,385</b>
Los Angeles	<del>\$5,000,000</del>	<del>\$8,504,444</del> <b>\$5,000,000</b>	<del>\$8,504,444</del> <b>\$5,000,000</b>	<del>\$8,504,444</del> <b>\$5,446,809</b>	<del>\$8,504,444</del> <b>\$5,446,809</b>	<del>\$39,005,776</del> <b>\$25,893,618</b>
Madera	<del>\$98,794</del>	<del>\$77,958</del> <b>\$98,794</b>	<del>\$77,958</del> <b>\$98,794</b>	<del>\$77,958</del> <b>\$93,399</b>	<del>\$77,958</del> <b>\$93,399</b>	<del>\$410,626</del> <b>\$483,180</b>
Marin	<del>\$196,406</del>	<del>\$161,170</del> <b>\$196,406</b>	<del>\$161,170</del> <b>\$196,406</b>	<del>\$161,170</del> <b>\$215,167</b>	<del>\$161,170</del> <b>\$215,167</b>	<del>\$841,086</del> <b>\$1,019,552</b>
Merced	<del>\$124,811</del>	<del>\$95,393</del> <b>\$124,811</b>	<del>\$95,393</del> <b>\$124,811</b>	<del>\$95,393</del> <b>\$111,632</b>	<del>\$95,393</del> <b>\$111,632</b>	<del>\$608,384</del> <b>\$597,697</b>
Mono	<del>\$44,550</del>	<del>\$44,550</del> <b>\$0</b>	<del>\$44,550</del> <b>\$0</b>	<del>\$44,550</del> <b>\$0</b>	<del>\$44,550</del> <b>\$0</b>	<del>\$222,750</del> <b>\$89,100</b>
Monterey (Includes San Benito)	<del>\$342,999</del>	<del>\$270,701</del> <b>\$342,999</b>	<del>\$270,701</del> <b>\$342,999</b>	<del>\$270,701</del> <b>\$311,421</b>	<del>\$270,701</del> <b>\$311,421</b>	<del>\$1,425,804</del> <b>\$1,651,839</b>
Nevada	<del>\$49,862</del>	<del>\$38,366</del> <b>\$49,862</b>	<del>\$38,366</del> <b>\$49,862</b>	<del>\$38,366</del> <b>\$47,570</b>	<del>\$38,366</del> <b>\$47,570</b>	<del>\$203,324</del> <b>\$244,726</b>
Orange	<del>\$2,705,624</del>	<del>\$2,316,662</del> <b>\$2,285,779</b>	<del>\$2,316,662</del> <b>\$1,882,554</b>	<del>\$2,316,662</del> <b>\$2,295,489</b>	<del>\$2,316,662</del> <b>\$2,295,489</b>	<del>\$11,968,272</del> <b>\$11,464,935</b>
Plumas (Includes Lassen, Modoc, Sierra, Siskiyou)	<del>\$233,694</del>	<del>\$181,513</del> <b>\$233,694</b>	<del>\$181,513</del> <b>\$233,694</b>	<del>\$181,513</del> <b>\$206,044</b>	<del>\$181,513</del> <b>\$206,044</b>	<del>\$959,744</del> <b>\$1,113,170</b>
Riverside	<del>\$1,454,431</del>	<del>\$1,149,316</del> <b>\$1,454,431</b>	<del>\$1,149,316</del> <b>\$1,454,431</b>	<del>\$1,149,316</del> <b>\$1,234,044</b>	<del>\$1,149,316</del> <b>\$1,234,044</b>	<del>\$6,061,693</del> <b>\$6,831,381</b>
Sacramento (includes El Dorado, Placer and Yolo)	<del>\$1,262,278</del>	<del>\$986,066</del> <b>\$1,262,278</b>	<del>\$986,066</del> <b>\$1,262,278</b>	<del>\$986,066</del> <b>\$1,318,415</b>	<del>\$986,066</del> <b>\$1,318,415</b>	<del>\$5,206,543</del> <b>\$6,423,664</b>
San Bernardino	<del>\$943,680</del> <b>\$1,033,680</b>	<del>\$943,680</del>	<del>\$943,680</del>	<del>\$943,680</del> <b>\$905,254</b>	<del>\$943,680</del> <b>\$905,254</b>	<del>\$4,718,401</del> <b>\$4,731,548</b>
San Diego	<del>\$2,291,806</del>	<del>\$2,291,806</del> <b>\$2,291,806</b>	<del>\$2,291,806</del> <b>\$2,291,806</b>	<del>\$2,291,806</del> <b>\$2,297,977</b>	<del>\$2,291,806</del> <b>\$2,297,977</b>	<del>\$11,459,032</del> <b>\$11,471,372</b>
San Francisco	<del>\$3,248,921</del>	<del>\$2,672,237</del> <b>\$3,248,921</b>	<del>\$2,672,237</del> <b>\$3,248,921</b>	<del>\$2,672,237</del> <b>\$3,259,617</b>	<del>\$2,672,237</del> <b>\$3,259,617</b>	<del>\$43,937,869</del> <b>\$16,265,997</b>
San Joaquin	<del>\$552,736</del>	<del>\$464,049</del> <b>\$767,907</b>	<del>\$464,049</del> <b>\$863,530</b>	<del>\$464,049</del> <b>\$844,608</b>	<del>\$464,049</del> <b>\$844,608</b>	<del>\$2,408,933</del> <b>\$3,873,389</b>
San Mateo	<del>\$384,482</del>	<del>\$302,549</del> <b>\$384,482</b>	<del>\$302,549</del> <b>\$384,482</b>	<del>\$302,549</del> <b>\$367,992</b>	<del>\$302,549</del> <b>\$367,992</b>	<del>\$4,594,678</del> <b>\$1,889,430</b>
Santa Barbara	<del>\$257,928</del>	<del>\$214,474</del> <b>\$257,928</b>	<del>\$214,474</del> <b>\$257,928</b>	<del>\$214,474</del> <b>\$224,713</b>	<del>\$214,474</del> <b>\$224,713</b>	<del>\$1,115,824</del> <b>\$1,223,210</b>
Santa Clara	<del>\$1,106,107</del> <b>\$1,033,492</b>	<del>\$883,493</del> <b>\$1,362,869</b>	<del>\$883,493</del> <b>\$1,458,492</b>	<del>\$883,493</del> <b>\$1,260,321</b>	<del>\$883,493</del> <b>\$1,260,321</b>	<del>\$4,639,080</del> <b>\$6,375,495</b>
Santa Cruz	<del>\$144,818</del>	<del>\$144,196</del> <b>\$144,818</b>	<del>\$144,196</del> <b>\$144,818</b>	<del>\$144,196</del> <b>\$224,624</b>	<del>\$144,196</del> <b>\$224,624</b>	<del>\$604,598</del> <b>\$883,702</b>
Solano	<del>\$234,144</del>	<del>\$234,144</del>	<del>\$234,144</del>	<del>\$234,144</del> <b>\$125,089</b>	<del>\$234,144</del> <b>\$125,089</b>	<del>\$1,170,719</del> <b>\$952,610</b>
Stanislaus	<del>\$186,573</del>	<del>\$186,573</del>	<del>\$186,573</del>	<del>\$186,573</del> <b>\$202,919</b>	<del>\$186,573</del> <b>\$202,919</b>	<del>\$932,865</del> <b>\$965,557</b>
Ryan White HIV/AIDS Program - Part B						
Contractor Name	Year 1	Year 2	Year 3	Year 4	Year 5	Total
Tulare	<del>\$245,689</del> <b>\$245,690</b>	<del>\$245,689</del>	<del>\$245,689</del>	<del>\$245,689</del> <b>\$232,699</b>	<del>\$245,689</del> <b>\$232,699</b>	<del>\$1,228,447</del> <b>\$1,073,054</b>
Ventura	<del>\$562,354</del>	<del>\$286,072</del> <b>\$562,354</b>	<del>\$286,072</del> <b>\$562,354</b>	<del>\$286,072</del> <b>\$479,596</b>	<del>\$286,072</del> <b>\$479,596</b>	<del>\$1,706,640</del> <b>\$2,646,254</b>
Ampla Health (Colusa, Sutter, Yuba)	<del>\$154,493</del>	<del>\$119,904</del> <b>\$154,493</b>	<del>\$119,904</del> <b>\$154,493</b>	<del>\$119,904</del> <b>\$337,989</b>	<del>\$119,904</del> <b>\$337,989</b>	<del>\$634,110</del> <b>\$939,457</b>
Caring Choices (Shasta, Tehama, Trinity)	<del>\$209,439</del>	<del>\$159,995</del> <b>\$209,439</b>	<del>\$159,995</del> <b>\$209,439</b>	<del>\$159,995</del> <b>\$0</b>	<del>\$159,995</del> <b>\$0</b>	<del>\$849,419</del> <b>\$628,317</b>
Community Medical Center (Fresno)	<del>\$713,514</del>	<del>\$68,065</del> <b>\$713,514</b>	<del>\$68,065</del> <b>\$713,514</b>	<del>\$68,065</del> <b>\$674,454</b>	<del>\$68,065</del> <b>\$674,454</b>	<del>\$1,995,096</del> <b>\$3,489,450</b>
CCMC (Lake and Mendocino)	<del>\$123,048</del> <b>\$123,050</b>	<del>\$107,446</del> <b>\$123,048</b>	<del>\$107,446</del> <b>\$123,048</b>	<del>\$107,446</del> <b>\$98,185</b>	<del>\$107,446</del> <b>\$98,185</b>	<del>\$662,834</del> <b>\$565,516</b>
John C. Fremont (Mariposa)	<del>\$44,195</del>	<del>\$44,195</del>	<del>\$44,195</del>	<del>\$44,195</del> <b>\$40,019</b>	<del>\$44,195</del> <b>\$40,019</b>	<del>\$220,977</del> <b>\$212,623</b>
Queen of the Valley (Napa)	<del>\$83,148</del>	<del>\$65,247</del> <b>\$83,148</b>	<del>\$65,247</del> <b>\$83,148</b>	<del>\$65,247</del> <b>\$82,009</b>	<del>\$65,247</del> <b>\$82,009</b>	<del>\$344,137</del> <b>\$413,462</b>
Access Support Network (San Luis Obispo)	<del>\$122,100</del>	<del>\$93,227</del> <b>\$122,100</b>	<del>\$93,227</del> <b>\$122,100</b>	<del>\$93,227</del> <b>\$117,835</b>	<del>\$93,227</del> <b>\$117,835</b>	<del>\$496,008</del> <b>\$601,970</b>
Santa Rosa CHC (Sonoma)	<del>\$334,949</del>	<del>\$266,809</del> <b>\$334,949</b>	<del>\$266,809</del> <b>\$334,949</b>	<del>\$266,809</del> <b>\$379,814</b>	<del>\$266,809</del> <b>\$379,814</b>	<del>\$1,398,185</del> <b>\$1,764,475</b>
Sierra Hope (Alpine, Amador, Calaveras, Inyo, Mono, Tuolumne)	<del>\$133,451</del>	<del>\$104,013</del> <b>\$133,451</b>	<del>\$104,013</del> <b>\$133,451</b>	<del>\$104,013</del> <b>\$183,999</b>	<del>\$104,013</del> <b>\$183,999</b>	<del>\$549,505</del> <b>\$812,901</b>
Total	<del>\$28,444,129</del> <b>\$28,546,424</b>	<del>\$28,589,575</del> <b>\$28,623,348</b>	<del>\$28,444,126</del> <b>\$28,476,992</b>	<del>\$27,876,061</del> <b>\$28,458,132</b>	<del>\$27,876,061</del> <b>\$28,258,132</b>	<del>\$141,229,960</del> <b>\$142,363,028</b>



**Exhibit B, A1**  
Budget Detail and Payment Provisions

**1. Invoicing and Payment**

A. Upon completion of project activities as provided in the Grant Application, and upon receipt and approval of the invoices, the State agrees to reimburse the Grantee for activities performed and expenditures incurred in accordance with the costs specified herein.

~~B. Invoices shall include the Grant Number and shall be submitted in triplicate not more frequently than monthly in arrears to:~~

~~Invoice Desk  
California Department of Public Health  
CARE Program  
MS 770  
1616 Capitol Avenue, Suite 616  
Sacramento, CA 95899-7426~~

**Invoices shall include the Grant Number and shall be e-mailed as signed copies of HCP invoices (PDF format), including HCP Summary Tracking (Excel format) and detailed supporting documentation directly to the HCP invoice inbox:**

**[HCP\\_Invoices@cdph.ca.gov](mailto:HCP_Invoices@cdph.ca.gov)**

C. Invoices shall:

- 1) Be prepared on Grantee letterhead. If invoices are not on produced letterhead invoices must be signed by an authorized official, employee or agent certifying that the expenditures claimed represent activities performed and are in accordance with the Grant Application under this Grant.
- 2) Bear the Grantee's name as shown on the Grant.
- 3) Identify the billing and/or performance period covered by the invoice.
- 4) Itemize costs for the billing period in the same or greater level of detail as indicated in this Grant. Subject to the terms of this Grant, reimbursement may only be sought for those costs and/or cost categories expressly identified as allowable and approved by CDPH.

**2. Budget Contingency Clause**

A. It is mutually agreed that if the Budget Act of the current year and/or any subsequent years covered under this Agreement does not appropriate sufficient funds for the program, this Agreement shall be of no further force and effect. In this event, the State shall have no liability to pay any funds whatsoever to Grantee or to furnish any other considerations under this Agreement and Grantee shall not be obligated to fulfill any provisions of this Agreement.

B. If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this program, the State shall have the option to either cancel this Agreement with no liability occurring to the State, or offer an agreement amendment to Grantee to reflect the reduced amount.

**3. Prompt Payment Clause**

Payment will be made in accordance with, and within the time specified in, Government Code Chapter 4.5, commencing with Section 927.

**Exhibit B, A1**  
 Budget Detail and Payment Provisions

**4. Amounts Payable**

- A. The amounts payable under this Grant shall not exceed \$203,324 **\$244,726**.
- B. Payment allocations shall be made for allowable expenses up to the amount annually encumbered commensurate with the state fiscal year in which services are fulfilled and/or goods are received.

**5. Timely Submission of Invoices**

- ~~A. A final undisputed invoice shall be submitted for payment no more than forty five (45) calendar days following the expiration or termination date of this Grant, unless a later or alternate deadline is agreed to in writing by the program grant manager. Said invoice should be clearly marked "Final Invoice", indicating that all payment obligations of the State under this Grant have ceased and that no further payments are due or outstanding.~~

**An invoice shall be submitted for payment no more than forty-five (45) calendar days following the end of each quarterly service period or thirty (30) calendar days following each monthly service period. The quarterly invoicing deadlines are as follows:**

<u>Quarter</u>	<u>Invoice Due Date</u>
<u>Quarter 1 (April 1<sup>st</sup> – June 30<sup>th</sup>)</u>	<u>August 15<sup>th</sup></u>
<u>Quarter 2 (July 1<sup>st</sup> – September 30<sup>th</sup>)</u>	<u>November 15<sup>th</sup></u>
<u>Quarter 3 (October 1<sup>st</sup> – December 31<sup>st</sup>)</u>	<u>February 15<sup>th</sup></u>
<u>Quarter 4 (January 1<sup>st</sup> – March 31<sup>st</sup>)</u>	<u>May 15<sup>th</sup></u> <b><u>Note: No extensions will be approved as this date is a hard deadline for the purposes of closing out the federal grant. Invoices received after this date may not be reimbursed.</u></b>

- ~~B. The State may, at its discretion, choose not to honor any delinquent final invoice if the Grantee fails to obtain prior written State approval of an alternate final invoice submission deadline. **If invoice is not submitted by the deadline, and extension may be offered for a MAXIMUM of fourteen (14) calendar days. NO EXTENSIONS MAY BE GRANTED FOR THE Q4 INVOICE. If the invoice is not submitted after the two-week extension, current quarterly/monthly expenditures shall be combined in the next invoice submission, but this may cause significant delays in reimbursement for all invoices for the current FY. Q4 invoice (including any charges from previous quarters) has a hard deadline of May 15th.**~~

**6. Grant Closure**

- A. **Upon the expiration or termination date of this Grant:**
  - 1) A final undisputed invoice shall be submitted for payment no more than forty-five (45) calendar days following this date. Said invoice should be clearly marked "Final Invoice", indicating that all payment obligations of the State under this Grant have ceased and that no further payments are due or outstanding.**
  - 2) A final list of all paid invoices and a completed Contractor Release Form (CDPH 2532) must be emailed to the [HCP\\_Invoices@cdph.ca.gov](mailto:HCP_Invoices@cdph.ca.gov) once all payments are received.**

**Exhibit B, A1**  
Budget Detail and Payment Provisions

**RELEASE FORM SHOULD NOT BE SIGNED BY ANY PARTIES UNTIL ALL INVOICES  
HAVE BEEN PAID AND RECEIVED.**

**B. The State may, at its discretion, choose not to honor any delinquent final invoice.**

**6.7. Travel and Per Diem Reimbursement**

**Any reimbursement for necessary travel and per diem shall be at the rates currently in effect  
as established by the California Department of Human Resources (CalHR).**

Pursuant to Public Contract Code section 2010, a person that submits a bid or proposal to, or otherwise proposes to enter into or renew a contract with, a state agency with respect to any contract in the amount of \$100,000 or above shall certify, under penalty perjury, at the time the bid or proposal is submitted or the contract is renewed, all of the following:

1. CALIFORNIA CIVIL RIGHTS LAWS: For contracts executed or renewed after January 1, 2017, the contractor certifies compliance with the Unruh Civil Rights Act (Section 51 of the Civil Code) and the Fair Employment and Housing Act (Section 12960 of the Government Code); and

2. EMPLOYER DISCRIMINATORY POLICIES: For contracts executed or renewed after January 1, 2017, if a Contractor has an internal policy against a sovereign nation or peoples recognized by the United States government, the Contractor certifies that such policies are not used in violation of the Unruh Civil Rights Act (Section 51 of the Civil Code) or the Fair Employment and Housing Act (Section 12960 of the Government Code).

**CERTIFICATION**

I, the official named below, certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.		<i>Federal ID Number</i>
<i>Proposer/Bidder Firm Name (Printed)</i> County of Nevada		94-6000526
<i>By (Authorized Signature)</i> <u>Susan Hoek</u> <small>Susan Hoek (Dec 7, 2022 13:58 PST)</small>		
<i>Printed Name and Title of Person Signing</i> Susan Hoek, Chair, Board of Supervisors		
<i>Date Executed</i> 12/07/2022	<i>Executed in the County and State of</i> Nevada CA	

# Contractor Certification Clause

CCC 04/2017

## CERTIFICATION

I, the official named below, CERTIFY UNDER PENALTY OF PERJURY that I am duly authorized to legally bind the prospective Contractor to the clause(s) listed below. This certification is made under the laws of the State of California.

Contractor/Bidder Firm Name (Printed)	Federal ID Number
County of Nevada	94-6000526

By (Authorized Signature)

*Susan Hoek*

Susan Hoek (Dec 7, 2022 13:58 PST)

Printed Name and Title of Person Signing

Susan Hoek, Chair, Board of Supervisors

Date Executed	Executed in the County of
12/07/2022	Nevada

## CONTRACTOR CERTIFICATION CLAUSES

### STATEMENT OF COMPLIANCE:

Contractor has, unless exempted, complied with the nondiscrimination program requirements. (GC 12990 (a-f) and CCR, Title 2, Section 8103) (Not applicable to public entities.)

### DRUG-FREE WORKPLACE REQUIREMENTS:

Contractor will comply with the requirements of the Drug-Free Workplace Act of 1990 and will provide a drug-free workplace by taking the following actions:

- a) Publish a statement notifying employees that unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited and specifying actions to be taken against employees for violations.
- b) Establish a Drug-Free Awareness Program to inform employees about:
  1. the dangers of drug abuse in the workplace;
  2. the person's or organization's policy of maintaining a drug-free workplace;
  3. any available counseling, rehabilitation and employee assistance programs; and,

4. penalties that may be imposed upon employees for drug abuse violations.
- c) Provide that every employee who works on the proposed Agreement will:
1. receive a copy of the company's drug-free policy statement; and,
  2. agree to abide by the terms of the company's statement as a condition of employment on the Agreement.

Failure to comply with these requirements may result in suspension of payments under the Agreement or termination of the Agreement or both and Contractor may be ineligible for award of any future State agreements if the department determines that any of the following has occurred: (1) the Contractor has made false certification, or violated the certification by failing to carry out the requirements as noted above. (GC 8350 et seq.)

#### **NATIONAL LABOR RELATIONS BOARD CERTIFICATION:**

Contractor certifies that no more than one (1) final unappealable finding of contempt of court by a Federal court has been issued against Contractor within the immediately preceding two-year period because of Contractor's failure to comply with an order of a Federal court which orders Contractor to comply with an order of the National Labor Relations Board. (PCC 10296) (Not applicable to public entities.)

#### **CONTRACTS FOR LEGAL SERVICES \$50,000 OR MORE- PRO BONO REQUIREMENT:**

Contractor hereby certifies that contractor will comply with the requirements of Section 6072 of the Business and Professions Code, effective January 1, 2003.

Contractor agrees to make a good faith effort to provide a minimum number of hours of pro bono legal services during each year of the contract equal to the lesser of 30 multiplied by the number of full time attorneys in the firm's offices in the State, with the number of hours prorated on an actual day basis for any contract period of less than a full year or 10% of its contract with the State.

Failure to make a good faith effort may be cause for non-renewal of a state contract for legal services, and may be taken into account when determining the award of future contracts with the State for legal services.

#### **EXPATRIATE CORPORATIONS:**

Contractor hereby declares that it is not an expatriate corporation or subsidiary of an expatriate corporation within the meaning of Public Contract Code Section 10286 and 10286.1, and is eligible to contract with the State of California.

#### **SWEATFREE CODE OF CONDUCT:**

- a. All Contractors contracting for the procurement or laundering of apparel, garments or corresponding accessories, or the procurement of equipment, materials, or supplies, other than procurement related to a public works contract, declare under penalty of perjury that no apparel, garments or corresponding accessories, equipment, materials, or supplies furnished to the state pursuant to the contract have been laundered or produced in

- whole or in part by sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor, or with the benefit of sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor. The contractor further declares under penalty of perjury that they adhere to the Sweatfree Code of Conduct as set forth on the California Department of Industrial Relations [website](#) and Public Contract Code Section 6108.
- b. The contractor agrees to cooperate fully in providing reasonable access to the contractor's records, documents, agents or employees, or premises if reasonably required by authorized officials of the contracting agency, the Department of Industrial Relations, or the Department of Justice to determine the contractor's compliance with the requirements under paragraph (a).

#### **DOMESTIC PARTNERS:**

For contracts of \$100,000 or more, Contractor certifies that Contractor is in compliance with Public Contract Code section 10295.3.

#### **GENDER IDENTITY:**

For contracts of \$100,000 or more, Contractor certifies that Contractor is in compliance with Public Contract Code section 10295.35.

#### **DOING BUSINESS WITH THE STATE OF CALIFORNIA**

The following laws apply to persons or entities doing business with the State of California.

#### **CONFLICT OF INTEREST:**

Contractor needs to be aware of the following provisions regarding current or former state employees. If Contractor has any questions on the status of any person rendering services or involved with the Agreement, the awarding agency must be contacted immediately for clarification.

- a) Current State Employees (PCC 10410):
1. No officer or employee shall engage in any employment, activity or enterprise from which the officer or employee receives compensation or has a financial interest and which is sponsored or funded by any state agency, unless the employment, activity or enterprise is required as a condition of regular state employment.
  2. No officer or employee shall contract on his or her own behalf as an independent contractor with any state agency to provide goods or services.
- b) Former State Employees (PCC 10411):
1. For the two-year period from the date he or she left state employment, no former state officer or employee may enter into a contract in which he or she engaged in any of the negotiations, transactions, planning, arrangements or any part of the decision-

making process relevant to the contract while employed in any capacity by any state agency.

2. For the twelve-month period from the date he or she left state employment, no former state officer or employee may enter into a contract with any state agency if he or she was employed by that state agency in a policy-making position in the same general subject area as the proposed contract within the 12-month period prior to his or her leaving state service.

If Contractor violates any provisions of above paragraphs, such action by Contractor shall render this Agreement void. (PCC 10420)

Members of boards and commissions are exempt from this section if they do not receive payment other than payment of each meeting of the board or commission, payment for preparatory time and payment for per diem. (PCC 10430 (e))

#### **LABOR CODE/WORKERS' COMPENSATION:**

Contractor needs to be aware of the provisions which require every employer to be insured against liability for Worker's Compensation or to undertake self-insurance in accordance with the provisions, and Contractor affirms to comply with such provisions before commencing the performance of the work of this Agreement. (Labor Code Section 3700)

#### **AMERICANS WITH DISABILITIES ACT:**

Contractor assures the State that it complies with the Americans with Disabilities Act (ADA) of 1990, which prohibits discrimination on the basis of disability, as well as all applicable regulations and guidelines issued pursuant to the ADA. (42 U.S.C. 12101 et seq.)

#### **CONTRACTOR NAME CHANGE:**

An amendment is required to change the Contractor's name as listed on this Agreement. Upon receipt of legal documentation of the name change the State will process the amendment. Payment of invoices presented with a new name cannot be paid prior to approval of said amendment.

#### **CORPORATE QUALIFICATIONS TO DO BUSINESS IN CALIFORNIA:**

- a) When agreements are to be performed in the state by corporations, the contracting agencies will be verifying that the contractor is currently qualified to do business in California in order to ensure that all obligations due to the state are fulfilled.
- b) "Doing business" is defined in R&TC Section 23101 as actively engaging in any transaction for the purpose of financial or pecuniary gain or profit. Although there are some statutory exceptions to taxation, rarely will a corporate contractor performing within the state not be subject to the franchise tax.
- c) Both domestic and foreign corporations (those incorporated outside of California) must be in good standing in order to be qualified to do business in California. Agencies will determine whether a corporation is in good



standing by calling the Office of the Secretary of State.

**RESOLUTION:**

A county, city, district, or other local public body must provide the State with a copy of a resolution, order, motion, or ordinance of the local governing body which by law has authority to enter into an agreement, authorizing execution of the agreement.

**AIR OR WATER POLLUTION VIOLATION:**

Under the State laws, the Contractor shall not be: (1) in violation of any order or resolution not subject to review promulgated by the State Air Resources Board or an air pollution control district; (2) subject to cease and desist order not subject to review issued pursuant to Section 13301 of the Water Code for violation of waste discharge requirements or discharge prohibitions; or (3) finally determined to be in violation of provisions of federal law relating to air or water pollution.

**PAYEE DATA RECORD FORM STD. 204:**

This form must be completed by all contractors that are not another state agency or other government entity.