

**SNOHOMISH HEALTH DISTRICT
2018 – 2021 CONSOLIDATED CONTRACT**

CONTRACT NUMBER: CLH18261

AMENDMENT NUMBER: 24

PURPOSE OF CHANGE: To amend this contract between the DEPARTMENT OF HEALTH hereinafter referred to as “DOH”, and SNOHOMISH HEALTH DISTRICT, a Local Health Jurisdiction, hereinafter referred to as “LHJ”, pursuant to the Modifications/Waivers clause, and to make necessary changes within the scope of this contract and any subsequent amendments thereto.

IT IS MUTUALLY AGREED: That the contract is hereby amended as follows:

1. Exhibit A Statements of Work, attached and incorporated by this reference, are amended as follows:

- ☐ Adds Statements of Work for the following programs:
- ☒ Amends Statements of Work for the following programs:
- Commercial Tobacco Prevention Program - Effective July 1, 2021
 - COVID-19 Coordinated Response - Effective July 1, 2020
 - Foundational Public Health Services (FPHS) - Effective July 1, 2021
 - Infectious Disease Prevention Section (IDPS) - Effective July 1, 2021
- ☐ Deletes Statements of Work for the following programs:

2. Exhibit B-24 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-23 Allocations as follows:

- ☒ Increase of **\$2,916,100** for a revised maximum consideration of **\$40,564,904**.
- ☐ Decrease of _____ for a revised maximum consideration of _____.
- ☐ No change in the maximum consideration of _____.
Exhibit B Allocations are attached only for informational purposes.

3. Exhibit C-24 Schedule of Federal Awards, attached and incorporated by this reference, amends and replaces Exhibit C-23.

Unless designated otherwise herein, the effective date of this amendment is the date of execution.

ALL OTHER TERMS AND CONDITIONS of the original contract and any subsequent amendments remain in full force and effect.

IN WITNESS WHEREOF, the undersigned has affixed his/her signature in execution thereof.

SNOHOMISH HEALTH DISTRICT

STATE OF WASHINGTON
DEPARTMENT OF HEALTH

Date

Date

APPROVED AS TO FORM ONLY
Assistant Attorney General

2018-2021 CONSOLIDATED CONTRACT
EXHIBIT A
STATEMENTS OF WORK
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Exhibit A
Statement of Work
Contract Term: 2018-2021

DOH Program Name or Title: Commercial Tobacco Prevention Program - Effective July 1, 2021

Local Health Jurisdiction Name: Snohomish Health District

Contract Number: CLH18261

SOW Type: Revision **Revision # (for this SOW)** 1

Period of Performance: July 1, 2021 through December 31, 2021

Funding Source ☒ Federal Subrecipient ☒ State ☐ Other	Federal Compliance (check if applicable) ☒ FFATA (Transparency Act) ☐ Research & Development	Type of Payment ☒ Reimbursement ☐ Fixed Price
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Statement of Work Purpose: The purpose of this statement of work is to provide \$56,259 in SFY22 Youth Tobacco Vapor Products and \$37,772 in FFY21 Tobacco-Vape Prev Comp 1 funding for commercial tobacco (including vaping products) prevention and control activities.

Note: Commercial tobacco includes any product that contains tobacco and/or nicotine, such as cigarettes, cigars, electronic cigarettes, hookah, pipes, smokeless tobacco, heated tobacco, and other oral nicotine products. Commercial tobacco does not include FDA-approved nicotine replacement therapies.

Note: Due dates and allocations are for purposes of reflecting the total annual allocation and reporting for SFY22. SFY22 will be split between the current 2018-2021 Consolidated Contract (ConCon) and the next ConCon term beginning January 1, 2022. Any unused portion of SFY21 will be carried forward into the new contract term.

Revision Purpose: The purpose of this revision is to add \$14,658 in SFY21 Marijuana Education funding, and add task number 7 to coincide with the added funding.

Chart of Accounts	Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only) Start Date End Date	Current Consideration	Change Increase (+)	Total Consideration
SFY22 Youth Tobacco Vapor Products		N/A	334.04.93	77410892	07/01/21 12/31/21	56,259	0	56,259
FFY21 Tobacco-Vape Prev Comp 1		93.387	333.93.38	77410211	04/29/21 12/31/21	37,772	0	37,772
SFY21 Marijuana Education		N/A	334.04.93	77420822	09/01/21 12/31/21	0	14,658	14,658
TOTALS						94,031	14,658	108,689

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
1	Planning and Coordination 1. Using a template provided by CTPP, build upon existing 2020-2021 implementation plan for 2021-2022 in collaboration with representatives from all counties within the respective Accountable Communities of Health (ACH) region. 2. Participate in at least one (1) virtual meeting or in-person with CTPP and all regional and priority population contractors.		Contractor Monthly Progress Report (due the 15 th of the month) and Expenditure Report and Request for Reimbursement (due the 30 th of the month)	07/01/21-12/31/21	Funding utilized: State (YTVP, CDC) Reimbursement for actual expenditures, not to exceed total funding consideration. A19-1A invoice for CTPP expenditures must continue to be submitted to the DOH

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	As resources permit: 3. Participate in statewide commercial tobacco prevention coalition meetings as established.				Grants Management office per the consolidated contract. The expenditure worksheet in the CTPP budget workbook must be completed by the 30th of the month following the month in which costs were incurred.
2	Reduce Commercial Tobacco-Related Disparities Among Priority Populations 1. In collaboration with priority population contractors, engage and educate internal and external decision makers, stakeholders and community leaders about: a. The value of local control in preventing initiation and continued use of commercial tobacco products that lead to tobacco-related health issues and health disparities. b. The value of a comprehensive tobacco prevention program to prevent the initiation of commercial tobacco product use among youth and young adults c. Evidence-based and promising policy options to address the appeal of commercial tobacco products to youth and young adults, including the impact of commercial tobacco product flavors (including menthol) on youth initiation and use.		Contractor Monthly Progress Report (due the 15th of the month) and Expenditure Report and Request for Reimbursement (due the 30th of the month)	07/01/21-12/31/21	Funding utilized: State (YTVP, CDC) Reimbursement for actual expenditures, not to exceed total funding consideration. A19-1A invoice for CTPP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract. The expenditure worksheet in the CTPP budget workbook must be completed by the 30th of the month following the month in which costs were incurred.
3	Prevent Commercial Tobacco Use Among Youth and Young Adults 1. Build or enhance partnerships with youth-serving organizations and local champions (including identifying youth champions) to collaborate on youth access and industry marketing. 2. Plan and conduct a minimum of one meeting with the prevention-intervention lead at your region's Educational Service District (ESD) to establish a connection, build relationships, and		Contractor Monthly Progress Report (due the 15th of the month) and Expenditure Report and Request for Reimbursement (due the 30th of the month)	07/01/21-12/31/21	Funding utilized: State (YTVP, CDC) Reimbursement for actual expenditures, not to exceed total funding consideration. A19-1A invoice for CTPP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract.

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	share resources. It is encouraged that you coordinate with your YMPEP regional coordinators, where possible, to ensure these meetings are conducted together, and work collaboratively with other regional leads where ESD regions overlap.				The expenditure worksheet in the CTPP budget completed by the 30 th of the month following the month in which costs were incurred.
4	Leverage Resources for Promoting and Supporting Commercial Tobacco Dependence Treatment - Promote Washington State Quitline training, materials, and referral processes to providers (doh.wa.gov/quitlinetraining). - Promote the Washington State Quitline and self-help options for TUDT, including 2Morrow Health app (doh.wa.gov/quit) and This is Quitting (doh.wa.gov/vapefreewa), to people who use commercial tobacco. - In collaboration with CTPP, incorporate 2021-2022 Centers for Disease Control and Prevention (CDC) (e.g., Tips® campaign) materials into agency communications, and report efforts in a template provided by the CTPP as part of the monthly reporting requirement. - Disseminate TUDT resources provided by CTPP and/or developed locally to community-based organizations, centers, and networks supporting disparately affected communities that address emerging tobacco/e-cigarettes and are culturally & linguistically appropriate, trauma-informed, & equity-based.		Contractor Monthly Progress Report (due the 15 th of the month) and Expenditure Report and Request for Reimbursement (due the 30 th of the month)	07/01/21-12/31/21	Funding utilized: State (YTVP, CDC) Reimbursement for actual expenditures, not to exceed total funding consideration. A19-1A invoice for CTPP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract. The expenditure worksheet in the CTPP budget completed by the 30 th of the month following the month in which costs were incurred.
5	Eliminate Exposure to Secondhand Smoke and Electronic Cigarette Emissions - Conduct education and outreach within respective ACH region addressing local smoking and vaping in public places ordinances. Upon request: - Respond to technical assistance requests and needs from local agencies and organizations		Contractor Monthly Progress Report (due the 15 th of the month) and Expenditure Report and Request for Reimbursement (due the 30 th of the month)	07/01/21-12/31/21	Funding utilized: State (YTVP, CDC) Reimbursement for actual expenditures, not to exceed total funding consideration. A19-1A invoice for CTPP expenditures must continue to be submitted to the DOH

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	interested in adopting and/or that have adopted voluntary smoke-free and vape-free campus and/or organizational policies. 3. Respond to technical assistance requests to colleges/universities on the adoption and implementation of tobacco- and vape-free campuses. 4. Provide technical assistance to multi-unit housing organizations, landlords, and residents on smoke- and/or vape-free policies.				Grants Management office per the consolidated contract. The expenditure worksheet in the CTPP budget must be completed by the 30th of the month following the month in which costs were incurred.
6	Media and Health Communications Plan and implement public relations/earned media efforts (i.e. press releases, social media) utilizing national media campaigns to prevent youth initiation and support cessation.		Contractor Monthly Progress Report (due the 15th of the month) and Expenditure Report and Request for Reimbursement (due the 30th of the month)	07/01/21-12/31/21	Funding utilized: State (YTVP, CDC) Reimbursement for actual expenditures, not to exceed total funding consideration. A19-1A invoice for CTPP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract. The expenditure worksheet in the CTPP budget must be completed by the 30th of the month following the month in which costs were incurred.
7	Youth Marijuana Prevention and Education Conduct education and outreach activities to prevent the initiation and use of vapor products as delivery devices for nicotine and marijuana and that focuses on the potential health risks of vapor product use, regardless of the substance it contains.		Monthly Progress Report (due the 15th of the month) and Expenditure Report and Request for Reimbursement (due the 30th of the month.)	09/01/21-12/31/21	Funding utilized: State (Marijuana Prevention and Education) Reimbursement for actual expenditures, not to exceed total funding consideration. A19-1A invoice for CTPP expenditures must continue to be submitted to the DOH Grants Management office per the consolidated contract.

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
					<i>The expenditure worksheet in the CTPP budget workbook must be completed by the 30th of the month following the month in which costs were incurred.</i>

***For Information Only:**

Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: <http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf>

Special Requirements**Federal Funding Accountability and Transparency Act (FFATA)**

This statement of work is supported by federal funds that require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how the federal funds are spent. To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Data Universal Numbering System (DUNS®) number. Information about the LHJ and this statement of work will be made available on USASpending.gov by DOH as required by P.L. 109-282.

Program Specific Requirements/Narrative**Definitions:**

CONTRACTOR – LHJ performing work under this statement of work.

A. Contractor will:

1. Fulfill program administration roles and responsibilities:
 - a) The CTPP Regional Contractor shall ensure the DOH has the most current contact information of the local program administrator that is responsible for the performance of this statement of work.
 - b) Participate in required conference calls (including quarterly conference calls between MPEP and CTPP contractors), trainings, webinars, and in-person or virtual meetings for Commercial Tobacco Prevention Program (CTPP) contractors according to the schedule provided by DOH.
 - c) Submit an Annual Implementation Plan and Budget according to the deadlines in Section E below.
 - d) Submit accurate and complete progress reports, budgets, and A19 invoices, using the required guidance, reporting tool or system, and deadlines (see Section E below) provided by DOH.
 - e) Act as the fiduciary agent if subcontracting. DOH must be notified and approve of any subcontractors; however, subcontractor performance is the responsibility of each CTPP Regional Contractor.
 - f) Meet all requirements outlined in the CTPP Work Plan and Reporting Guidebook provided by CTPP.
 - g) Have completed background checks and on file for any staff or volunteer (funded and/or representing a CTPP contractor or subcontractor) who will be with youth and unsupervised. Prohibit any staff with a felony conviction related to their duties from supervising and interacting with minors while performing the duties of this contract. This requirement is consistent with existing statute RCW 9.96A.020.

B. DOH will support Contractor by providing:

1. Timely communications regarding funding amounts and/or funding reductions.
2. An annual calendar of key events, required and optional trainings and other key dates.
3. Contract oversight and point of contact for overall project coordination, technical assistance, and facilitation of project communication.
4. Templates for implementation plan, budget workbook, and reporting requirements.
5. Technical assistance on meeting project goals, objectives, and activities related to:
 - a) Adapting required and innovative activities to ensure they are culturally and linguistically appropriate evidence-based or evidence-informed, or promising programs.
 - b) Developing and adapting project materials so they are culturally and linguistically appropriate using Cultural and Linguistically Appropriate Services (CLAS) standards <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53>.
 - c) Providing relevant resources and training, as resources permit.
 - d) Meeting performance measure, evaluation, and data collection requirements.
 - e) Interpreting DOH guidelines, requirements, and expectations. This includes making determinations of whether CTPP funds may be used for activities and projects proposed by the LHJ.

C. Program Administration:

1. The contractor shall perform the requirements and activities defined in this statement of work (SOW) and the Commercial Tobacco Prevention Program (CTPP) Work Plan and Reporting Guidebook, revised 2021. At a minimum, program and fiscal performance will be monitored and evaluated monthly by the assigned DOH staff based on each contractor's Monthly Progress Report, and Monthly Expenditure Worksheet and A19 invoice. CTPP staff will also monitor and evaluate regional program performance during on-site visits [minimum one (1) per biennium] following requirements and protocols provided by CTPP.
2. The contractor shall provide DOH with the program administrator's name, address, telephone number, and any subsequent changes. This contract information will be kept in an internal DOH database, along with the same information of all staff supported in part/full with CTPP funds. Failure of the contractor to perform activities (including those subcontracted to other agencies or organizations) as described in the DOH-approved SOW included herein and subsequent amendments, and in accordance with DOH administrative and Contract Performance Policies, and with any applicable local, state, or federal law or regulation, may result in the reduction of funds, suspension of services, or the termination of this SOW.
3. DOH reserves the right to determine the amount of any reduction to this statement of work, based on contractor's performance. Any reduction shall be based on a review of the contractor's expenditure patterns and actual performance.
4. Make reasonable efforts throughout the period of performance, to identify and leverage resources from private or public entities to support costs under this program.
5. The contractor's annual work plan and budget must be approved by CTPP contract manager prior to implementation. This includes execution of subcontracts within the region. Any changes to either the work plan or budget, must also be approved by the DOH contract manager prior to implementation.

D. Subcontractor Requirements:

1. When subcontracting with an organization that is leading regional efforts in one or more counties, the Regional Contractor is required to include language in these contracts that reflects the following:
 - a. Submit monthly progress reports and invoices that reflect work performed and funding spent using tools provided by DOH or the Regional Contractor. Due dates may be set by the Regional Contractor to ensure they can meet the deadlines in Section E below.
2. When subcontracting with an organization to work directly with youth (ages 0-17), the Regional Contractor is required to include language in these contracts that reflects the following:
 - b. Provide verification that criminal history/background checks have been completed for any staff and volunteers who will work with youth (ages 0-17) and are on file.

E. Required Plans and Reports

The contractor shall submit required reports by the date due using required forms according to procedures issued by DOH. These reports and their due dates shall include, but not be limited to:

<u>Report</u>	<u>Date Due</u>
1. Submit an annual plan and budget	Annually, no later than July 30, 2021, using a template provided by CTPP. DOH approval will occur no later than August 15, 2021. Update as needed on SharePoint.
2. Expenditure Report and Request for Reimbursement (A19)	A19s and updated budget workbook due the 30 th of the month following the month in which costs are incurred. Non-health departments (non consolidated contracts): A-19 documents (PDFs) must be saved, signed and emailed with the following title format: <i>A-19-Contract #-organization name- month-year.</i> Year-end projections are due as follows: FY22: July 10, 2022. An invoice must be submitted market FINAL INVOICE PROJECTION Final Expenditure Reports and invoices are due no later than August 15, 2022 and must be marked FINAL INVOICE.
3. Final Expenditure Projections, Report and Request for Reimbursement (FY Closeout)	The 15 th of the month following the month in which activities were performed, including the final monthly progress report. Monthly reports of work will include a narrative on overall progress using the reporting template located on SharePoint provided by CTPP. All documents related to task activities will be attached.
4. Monthly Progress Report	Using a template provided by CTPP, complete project evaluation activity developed and coordinated by CTPP as requested.
5. Assessment and Evaluation	

The CTPP contractor shall be obligated to submit required reports after the close of the contract period, during the transfer of obligations to another contractor, or upon termination of the contract for any reason.

F. Payment

1. All expenditures incurred and reimbursements made for performance under this statement of work shall be based on actual allowable costs in accordance with the Commercial Tobacco Prevention Program (CTPP) Work Plan and Reporting Guidebook, revised 2021.
2. DOH will reimburse the contractor for actual allowable program costs. Billings for services on a monthly fraction of the budget will not be accepted or approved.
3. DOH shall pay the contractor all allowable costs incurred as evidenced by a proper invoice submitted to DOH on a timely basis, insofar as those allowable and allocable costs do not exceed that amount appropriated or otherwise available for such purposes as stated herein, or in subsequent amendments.
4. DOH shall pay for costs under this statement of work up to a total not exceeding the total funding consideration amount. Costs allowable under this statement of work are based on DOH-approved budget for periods of performance: July 1, 2021 to June 30, 2022.
5. Authorized and allowable program expenditures shall be reimbursed upon receipt and approval of the Monthly Progress Report, Monthly Expenditure Report and Request for Reimbursement form (A19-1A) according to Section E of this contract. If the Monthly Progress Report, Expenditure Report and/or Request for Reimbursement form (A19-1A) are not completed within 60 days of the month when expenditures were incurred, DOH may withhold approval and payment, at its discretion, until the 30th of the month following submittal.
6. Final expenditure projections must be submitted by the 10th of July to allow DOH to appropriately accrue funds to make final payments.
7. The final Monthly Expenditure Report and Request for Reimbursement form must be submitted to DOH no later than 45 days following the end of the contract year in order to assure reimbursement of approved costs.
8. Backup documentation can include, but is not limited to; receipts, invoices, billing records, work orders, positive time and attendance records (timesheets), travel vouchers and accounting expense reports. Backup documentation shall be kept on file by the fiscal agent and made available upon request by DOH.
9. Submission of electronic reports, deliverables, and other invoice attachments are preferred; however hard copies are acceptable.

G. Program Manual, Handbook, Policy References

Meet requirements outlined in the Commercial Tobacco Prevention Program (CTPP) Work Plan and Reporting Guidebook, Budget Workbook.

H. Special References (RCWs, WACs, etc)

As a provision of the Youth Tobacco and Vapor Product Prevention Account, [RCW 70.155.120](#), DOH shall, within up to seventy percent of available funds, provide grants to local health departments or other local community agencies to develop and implement coordinated tobacco and vapor product intervention strategies to prevent and reduce the use of tobacco and vapor products by youth.

I. Restrictions on Funds

Federal Funding Restrictions and Limitations:

- Subrecipients may not use funds for research.
- Subrecipients may not use funds for clinical care except as allowed by law.
- Subrecipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- Subrecipients may not use funds to purchase tobacco prevention curriculum for K-12 schools.
- Subrecipients may not use funds for tobacco compliance check inspections.
- Subrecipients may not use funds to pay for Synar or Federal Drug Administration (FDA) compliance monitoring.
- Generally, subrecipients may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- Reimbursement of pre-award costs generally is not allowed, unless the CDC provides written approval to the recipient.
- Other than for normal and recognized executive-legislative relationships, no funds may be used for:
 - Publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body.
 - The salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.
- See [Additional Requirement \(AR\) 12](#) for detailed guidance on this prohibition and [additional guidance on lobbying for CDC recipients](#).
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.
- In accordance with the United States Protecting Life in Global Health Assistance policy, all non-governmental organization (NGO) applicants acknowledge that foreign NGOs that receive funds provided through this award, either as a prime recipient or subrecipient, are strictly prohibited, regardless of the source of funds, from performing abortions as a method of family planning or engaging in any activity that promotes abortion as a method of family planning, or to provide financial support to any other foreign non-governmental organization that conducts such activities. See Additional Requirement (AR) 35 for applicability (<https://www.cdc.gov/grants/additionalrequirements/ar-35.html>).

DOH Program Contact

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Exhibit A
Statement of Work
Contract Term: 2018-2021

DOH Program Name or Title: COVID-19 Coordinated Response - Effective July 1, 2020

Local Health Jurisdiction Name: Snohomish Health District

Contract Number: CLH18261

SOW Type: Revision **Revision # (for this SOW)** 5

Period of Performance: July 1, 2020 through December 31, 2021

Funding Source ☒ Federal Subrecipient ☐ State ☐ Other ☒ Federal *Contractor	Federal Compliance (check if applicable) ☒ FFATA (Transparency Act) ☐ Research & Development	Type of Payment ☒ Reimbursement ☐ Fixed Price
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Statement of Work Purpose: The purpose of this statement of work is to provide supplemental funding for the LHJ to ensure adequate culturally and linguistically responsive testing, investigation and contact tracing resources to limit the spread of COVID-19

NOTE: Pending execution of a new consolidated contract term or an extension to the 2018-2021 consolidated contracts which currently end December 31, 2021, DOH plans to continue the task activities and funding as noted in the task(s) below in a new or revised statement of work effective January 1, 2022.

Revision Purpose: The purpose of this revision is to add additional funding to FFY20 ELC EDE LHJ ALLOCATION, adjust the funding period for BITV-COVID ED LHJ ALLOCATION- CARES from 07/01/20-12/31/21 to 07/01/20-06/30/21, moving the remaining allocation of BITV-COVID ED LHJ ALLOCATION-CARES to FFY20 ELC EDE LHJ ALLOCATION, and update task language, DCHS-Task 1 & 2; add funding to COVID 19 VACCINES and additional Task 3D for vaccine depot to Vaccine Services - Task 3.

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only) Start Date End Date	Current Consideration	Change Increase (+)	Total Consideration
BITV-COVID ED LHJ ALLOCATION-CARES	21.019	333.21.01	1897129V	07/01/20 06/30/21	4,430,804	-2,781,584	1,649,220
FEMA-75 COVID LHJ ALLOCATION	97.036	333.97.03	1897129W	07/01/20 12/30/20	0	0	0
FFY21 COVID19 VACCINE SERVICES-CARES	93.268	333.93.26	74310209	07/01/20 12/31/21	117,570	0	117,570
FFY21 COVID GFS LHJ REGIONAL	N/A	334.04.92	1897211G	12/31/20 06/30/21	0	0	0
FFY20 ELC EDE LHJ ALLOCATION	93.323	333.93.32	1897120E	01/15/21 12/31/21	8,929,635	2,981,584	11,911,219
FFY19 ELC COVID ED LHJ ALLOCATION	93.323	333.93.32	1897129G	01/01/21 12/31/21	3,993,137	0	3,993,137
*MASS VACCINATION FEMA 100%	97.036	333.97.03	934V0200	01/21/21 12/31/21	0	0	0
COVID 19 VACCINES	93.268	333.93.26	74310229	07/01/20 12/31/21	2,860,603	5,000	2,865,603
TOTALS					20,331,749	205,000	20,536,749

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Participate in public health emergency preparedness and response activities for COVID-19. This may include surveillance, epidemiology, laboratory capacity, infection control, mitigation, communications and or other preparedness and response activities for COVID-19.				
	Examples of key activities include:				
	- Incident management for the response - Testing				

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
- Case Investigation/Contact Tracing - Sustainable isolation and quarantine - Care coordination - Surge management - Data reporting NOTE: The purpose of this agreement is to supplement existing funds for local health jurisdictions to carry out surveillance, epidemiology, case investigations & contact tracing, laboratory capacity, infection control, mitigation, communications, community engagement, and other public health preparedness and response activities for COVID-19.	DCHS COVID-19 Response - Tasks 1 and 2 – Unspent ELC funding can be carried forward into new contract term effective January 1, 2022.				
1	Establish a budget plan and narrative to be submitted to the Department of Health (DOH) Contract Manager. DOH will send the “Budget narrative Template”, “Budget Guidance” and any other applicable documents that may be identified. <i>This statement of work includes FEMA funding as part of this allocation. Documentation will be requested to support these costs to provide to FEMA for a reimbursement request. Further instructions on the necessary documents and timeline for providing these will be shared.</i> DOH does recognize the public health response goes beyond December 2021 and authorizes local health jurisdictions the ability to maximize funding streams available to them by using short term funding first to have longer term funding available to continue to support the local health jurisdiction response activities beyond December 2021 as applicable.		Submit the budget plan and narrative using the template provided. <i>Provide the requested documentation to support costs for FEMA reimbursement reporting.</i>	Within 30 days of receiving any new award for DCHS COVID-19 Response tasks. <i>Upon request</i>	Reimbursement of actual costs incurred, not to exceed \$17,553,576 <i>\$17,353,576</i> total. <i>\$1,649,220</i> \$4,430,804 <i>BITV - COVID ED LHJ ALLOCATION - CARES Funding (MI 1897129V)</i> <i>\$11,911,219</i> \$8,929,635 <i>FFY20 ELC EDE LHJ ALLOCATION Funding (MI 1897120E)</i> <i>\$3,993,137</i> <i>FFY19 ELC COVID ED LHJ ALLOCATION Funding (MI 1897129G)</i> <i>Funding end date 10/18/2022</i>
2	1) LHJ Active monitoring activities. In partnership with WA DOH and neighboring Tribes, the LHJ must ensure adequate culturally and linguistically responsive testing, investigation and contact tracing resources to limit the spread disease. LHJs must conduct the following activities in accordance with the guidance to be provided by DOH. a. Allocate enough funding to ensure the following Contact Tracing and Case Investigation Support: Hire a minimum of 1.0 data entry FTE to assure system requirements for task 2.1.a. i. Contact tracing		Data collected and reported into DOH systems daily. Enter performance metrics daily into DOH identified systems Quarterly performance reporting updates		

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	1. Strive to maintain the capacity to surge a minimum of five (5) contact tracers for every 100,000 people in the jurisdiction, as needed, based on disease rates. DOH centralized investigations will count towards this minimum. 2. Have staff that reflect the demographic makeup of the jurisdiction and who can provide culturally and linguistically competent and responsive services. In addition, or alternatively, enter into an agreement(s) with Tribal, community-based and/or culturally-specific organizations to provide such services. DOH centralized investigations will count towards this minimum. 3. Ensure all contact tracing staff are trained in accordance with DOH investigative guidelines and data entry protocols. 4. Coordinate with Tribal partners in conducting contact tracing for Tribal members. 5. Ensure contact tracing and case investigations activities meet DOH case and Contact Tracing Metrics: (Metrics to be determined collaboratively by DOH, LHJs and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics. 6. Perform daily monitoring for symptoms during quarantine period of contacts ii. Case investigation 1. Strive to maintain the capacity to surge a minimum of five (5) case investigators and contact tracers for every 100,000 people in the jurisdiction, as needed, based on disease rates. DOH centralized investigation will count toward this minimum. 2. Enter all case investigation and outbreak data in WDRS following DOH guidance.		Enter all contact tracing data in CREST following guidance from-DOH. Enter all case investigation data in WDRS-following guidance from-DOH.		

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	a. Strive to enter all case investigation and outbreak data into CREST as directed by DOH. b. Ensure all staff designated to utilize WDRS have access and are trained in the system. c. Include if new positive cases are tied to a known existing positive case or indicate community spread. d. Conduct case investigation and monitor outbreaks. e. Coordinate with Tribal partners in conducting case investigations for tribal members. 3. Ensure contact tracing and case investigation activities meet DOH Case and Contact Tracing Metrics. (Metrics to be determined collaboratively by DOH, LHJs, and Tribes.) Work with DOH to develop a corrective action plan if unable to meet metrics. b. Testing i. Work with partners and Tribes to ensure testing is available to every person within the jurisdiction meeting current DOH criteria for testing and other local testing needs. ii. Work with partners and Tribes to ensure testing is provided in a culturally and linguistically responsive manner with an emphasis on making testing available to disproportionately impacted communities and as a part of the jurisdiction's contact tracing strategy. iii. Maintain a current list of entities providing COVID-19 testing and at what volume. Provide reports to DOH on testing locations and volume as requested. c. Surveillance FTE support at a minimum of .5 FTE Epidemiologist to support daily reporting needs below.		Maintain a current list of entities providing COVID-19 testing and at what volume. Provide reports to DOH Contract manager on testing locations and volume as requested.		

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	i. Ensure all COVID positive lab test results from LHJ are entered in to WDRS by 1) entering data directly in to WDRS, 2) sending test results to DOH to enter, or 3) working with DOH and entities conducting tests to implement an electronic method for test result submission. ii. Maintain records of all COVID negative lab test results from the LHJ and enter into WDRS when resources permit or send test results to DOH. iii. Collaborate with Tribes to ensure Tribal entities with appropriate public health authority have read/write access to WDRS and CREST to ensure that all COVID lab results from their jurisdiction are entered in WDRS or shared with the LHJ or DOH for entry. d. Tribal Support. Ensure alignment of contact tracing and support for patients and family by coordinating with local tribes if a patient identified as American Indian/Alaska Native and/or a member of a WA tribe. e. Support Infection Prevention and control for high-risk populations i. Migrant and seasonal farmworker support. Partner with farmers, agriculture sector and farmworker service organizations to develop and execute plans for testing, quarantine and isolation, and social service needs for migrant and seasonal farmworkers. ii. Congregate care facilities: In collaboration with the state licensing agency (DSHS), support infection prevention assessments, testing. Infection control and isolation and quarantine protocols in congregate care facilities. iii. High risk businesses or community-based operations. In collaboration with state licensing agencies and Labor and Industries, partner with food processing and manufacturing businesses to ensure adequate		<i>Ensure all COVID positive test results are entered into WDRS within 2 days of receipt</i> Quarterly performance updates related to culturally and linguistic competency and responsiveness, tribal support, infection prevention and control for high-risk populations, community education and regional active monitoring activities. Performance update should include status of all projects listed.		

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	practices to prevent COVID-19 exposure, conduct testing and respond to outbreaks. iv. Healthcare: Support infection prevention and control assessments, testing, cohorting, and isolation procedures. Provide educational resources to a variety of healthcare setting types (e.g., nursing homes, hospitals, dental, dialysis). v. Non-healthcare settings that house vulnerable populations: In collaboration with state corrections agency (DOC) and other state partners, support testing, infection control, isolation and quarantine and social services and wraparound supports for individuals living or temporarily residing in congregate living settings, including detention centers, prisons, jails, transition housing, homeless shelters, and other vulnerable populations. vi. Schools: In collaboration with OSPI and local health jurisdictions, support infection prevention and control and outbreak response in K-12 and university school settings f. Ensure adequate resources are directed towards H2A housing facilities within communities, fishing industries and long-term care facilities to prevent and control disease transmission. Funds can be used to hire support staff, provide incentives or facility-based funding for onsite infection prevention efforts, etc. g. Community education. Work with Tribes and partners to provide culturally and linguistically responsive community outreach and education related to COVID-19. h. Establish sustainable isolation and quarantine measures. i. Have at least one (1) location identified and confirmed through contract/formal agreement that can support isolation and quarantine adequate to the population for your jurisdiction		Quarterly performance updates to include name, address and capacity of identified location that can support isolation and		

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	with the ability to expand; alternatively, establish with an adjacent jurisdiction a formal agreement to provide the isolation and quarantine capacity adequate to the population for your jurisdiction with the ability to expand. ii. Maintain ongoing census data for isolation and quarantine for your population. iii. Planning must incorporate transfer or receipt of isolation and quarantine patients to from adjacent jurisdictions or state facilities in the event of localized increased need. iv. Planning must incorporate triggers and coordination to request state isolation and quarantine support either through mobile teams or the state facility to include site identification and access		quarantine, and confirmation of appropriate planning and coordination as required. Report census numbers to include historic total by month and monthly total for current quarter to date.		
COVID-19 Vaccine Services - Task 3 – will be extended through June 30, 2022 in new contract term effective January 1, 2022. Any unspent funds may be carried forward.					
3.A	Identify activity/activities to support COVID vaccine response in your community, using the examples below as a guideline. Example 1: Develop and implement communication strategies with health care providers, community, and/or other partners to help build vaccine confidence broadly and among groups anticipated to receive early vaccination, as well as dispel vaccine misinformation. Document and provide a plan that shows the communication strategies used with health care providers and other partners and the locally identified population anticipated to reach. Example 2: Engage in other vaccination planning activities such as partnership development, provider education, vaccination point of dispensing (POD) planning, tabletop exercises, engagement with communities, leaders, non-traditional provider, or vulnerable populations to develop strategies to ensure equitable access to vaccination services		Summary of the engagement strategies to be used with health care providers and other partners, and the locally identified population to be reached.	January 31, Annually	Reimbursement of actual costs incurred, not to exceed: \$117,570 FFY21 COVID19 VACCINE SERVICES-CARES (MI 74310209) \$2,860,603 COVID19 VACCINES (MI 74310229)
3.B	Implement the communication strategies or other activities, working with health care providers and other partners to reach the locally identified population, support providers in vaccination plans, and support equitable access to vaccination services.		Mid-term written report describing activity/activities and progress made to-date and	June 30, Annually	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
			strategies used (template to be provided)		
3.C	Catalog activities and conduct an evaluation of the strategies used		Final written report, showing the strategies used and the final progress of the reach (template to be provided)	December 31, Annually	
3.D	<i>Perform as a vaccine depot to provide COVID vaccine. Duties include ordering and redistributing of COVID-19 vaccine, assure storage space for minimum order sizes, initiating transfer in the Immunization Information System (IIS), coordinate with providers for physical transport of doses, and maintaining inventory of COVID vaccine by manufacturer.</i>		<i>a) Complete a redistribution agreement.</i> <i>b) Report inventory reconciliation page.</i> <i>c) Report lost (expired, spoiled, wasted) vaccine to the IIS.</i> <i>d) Report transfer doses in the IIS and VaccineFinder.</i> <i>e) Monitor and maintain vaccine temperature logs from digital data logger and/or the temperature monitoring system for a minimum of 3 years.</i>	<i>a) Complete by August 1, 2021.</i> <i>b) Reconcile and submit inventory once monthly in the IIS.</i> <i>c) Report lost vaccine within 72 hours in the IIS.</i> <i>d) Update within 24 hours from when transfers occur.</i> <i>e) Download as needed (retain temperature data on site for 3 years)</i>	<i>3.D Vaccine Depot: \$5,000 COVID 19 VACCINES Funding (MI 74310229) 07/01/21-12/31/21</i>
Single Incident Management Team (IMT) Mass Vaccination Clinics – Task 4					
	*NOTE: Task 4 activities for Mass Vaccination Clinics in this statement of work are NOT CONSIDERED SUBRECIPIENT but are as a CONTRACTOR of DOH. DOH reimbursement provided for local mass vaccination clinic (see definition below) planning, implementation and operations in coordination between Unified Command and the Incident Management Team/Organization (IMT) to administer the vaccine as efficiently, quickly, equitably, and safely in all regions of Washington State. State Supported, Locally Implemented.				*Reimbursement of eligible costs. MASS VACCINATION FEMA 100% Funding (MI 934V0200) (See Program Specific Requirements for

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Definition: Mass vaccination clinics defined as those outside of the usual healthcare delivery method such as pop-up clinics, mobile clinics, non-clinical facility (fairgrounds, arenas, etc.). Leaders Intent about this work from DOH is included as an attachment. Guidance on vaccination protocols must be followed as provided by DOH and CDC.				Mass Vaccination Task 4 below.)
4.A	Local health jurisdictions (LHJ) will coordinate planning and implementation of mass vaccination clinics/sites provided within the county with an IMT as approved by DOH. Request for an IMT should be submitted through the normal process through WebEOC if directed by DOH. Local health jurisdiction is the coordinating agency for the mass vaccination plan within the county. The IMT will be under the delegation authority of DOH and there to provide support and coordination for all efforts around vaccine planning, resource support and general guidance and information sharing in an order to regionally coordinate efforts. Local jurisdictions will maintain all decisional authority around vaccination planning and execution within their jurisdiction/district. Provide any information as requested by the IMT.		Submit to DOH a mass vaccination plan including: • type of site, • site locations, • throughput, • considerations made to ensure equity to historically marginalized populations, • and to the extent possible a regional map of sites/locations.	Within 30 days of contract amendment execution	
4.B	Funding for eligible Mass Vaccination activities are reimbursed on actual costs as outlined in the DOH guidance to provide the services and to carry out the mission. Funding will be dependent on full participation in DOH processes and all documentation will be required to be provided to fully close out funding requests by the end of the mission period of performance. Allowable costs include expenses such as facility rentals, staff to conduct planning, management, support and operation of the site, medical personnel for vaccinations, site		Submit estimated budget for the mass vaccination plan. Monthly Cost Summary Spreadsheet to the IMT/IMO by the fifth of the following month.	Within 30 days of contract amendment execution. Monthly	

Task Number	Task/Activity/Description	*May Support PHAB Standards/Measures	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	security personnel, wrap around services for staff (meals, travel, lodging), equipment (which must be pre-approved by DOH if it exceeds \$5,000 each), supplies for vaccinations and site operation. LHJs should provide narratives to help assist DOH finance know what expenditures were necessary to carry out the mission.				
4.C	Vaccination data – will be maintained according to current state and federal requirements. Vaccine Registration Systems – If a local jurisdiction or region does not have a registration system(s) the include internet based, phone option and other methods to ensure equitable registration, the state PrepMod system and tools will be available for use.		Submission of vaccine use into WA IIS database within 24hrs of use. Jurisdiction/Regions will ensure a fair and equitable process for registration of eligible Washingtonians across all available modalities.	Daily	
4.D	Regularly report on vaccinations sites and operational activities (number of vaccinations, personnel to operate the site, challenges, successes to share for learning across the public health system).		Provide monthly situation report to IMT/IMO on status of implementation of mass vaccination plan, or more frequently if that is the LHJ procedure. Sites operating for what time period, vaccines administered by site for the timeframe, estimated costs for that timeframe, any challenges/successes of note, including assistance requested.	Monthly	

***For Information Only:**

Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: <http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf>

Special Requirements**Federal Funding Accountability and Transparency Act (FFATA)**

This statement of work is supported by federal funds that require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how the federal funds are spent.

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Data Universal Numbering System (DUNS®) number.

Information about the LHJ and this statement of work will be made available on [USASpending.gov](https://www.usaspending.gov) by DOH as required by P.L. 109-282.

Program Specific Requirements/Narrative

DCHS COVID-19 Response - Tasks 1 and 2	BITV-COVID ED LHJ ALLOCATION-CARES
	FFY19 ELC COVID ED LHJ ALLOCATION
	FFY20 ELC EDE LHJ ALLOCATION
COVID-19 Vaccine Services - Task 3	FFY21 COVID 19 VACCINE SERVICES-CARES
	COVID 19 VACCINES
Single Incident Management Team (IMT) Mass Vaccination Clinics – Task 4	MASS VACCINATION FEMA 100%

DCHS COVID-19 Response - Tasks 1 and 2

Restrictions on Funds: Indirects are NOT allowable for CARES funding from September 2, 2020 forward – LHJ can charge administrative activities as direct costs but not incur indirects from September 2, 2020 through ~~June 30 December 31~~, 2021 for activities funded with CARES funds (COVID LOCAL CARES - COVID LHJ OFM ALLOCATION-CARES, BITV-COVID ED LHJ ALLOCATION-CARES, FEMA-75 COVID LHJ ALLOCATION)

- o Since the federal guidance was not updated until September 2, 2020, DOH understands that indirects could be charged from March–August, 2020.

Payment: Upon approval of deliverables and receipt of an invoice voucher, DOH will reimburse for actual allowable costs incurred. Billings for services on a monthly fraction of the budget will not be accepted or approved.

Submission of Invoice Vouchers: The LHJ shall submit correct monthly A19-1A invoice vouchers for amounts billable under this statement of work to DOH by the 25th of the following month or on a frequency no less often than quarterly.

COVID-19 Vaccine Services - Task 3 – allowable activities <https://www.doh.wa.gov/Portals/1/Documents/9240/AllowableUseFedOpsFunds.pdf>

Mass Vaccination (Task 4)

Program Manual, Handbook, Policy References:

Emergency Response Plan (or equivalent)

Medical Countermeasure/Mass Vaccination Plan

Restrictions on Funds (what funds can be used for which activities, not direct payments, etc.):

Non-mass vaccination efforts are not allowable through this funding stream.

Duplication of billing (sending request for reimbursement) to entities outside of this agreement is prohibited.

Indirect rates are not applicable to these funds.

Special References (RCWs, WACs, etc.):

County Health Emergency Documentation if applicable

Definitions:

Mass vaccination clinic are those outside of the usual healthcare delivery methods such as pop-up clinics, mobile clinics, non-clinical facility clinics (i.e., fairgrounds, arenas, etc.).

Special Billing Requirements:

Monthly invoices must be submitted timely to the regional IMT/Organization for review/approval prior to submission to DOH for reimbursement.

Contract (MI) Code: 934V0200 General Mass Vaccination

BARS Revenue Code: 333.97.03 Mass Vaccination Reimbursement

Special Instructions:

The LHJ is considered a CONTRACTOR of DOH **not** a subrecipient for this portion of the statement of work. An allocation of funds is not provided as these FEMA funds are only available as reimbursement of costs associated with implementation of the mass vaccination plan.

Detailed documentation must be maintained as directed by the IMT/Organization and DOH to substantiate costs associated with these activities for submission to FEMA upon request by DOH.

Eligible costs from the timeframe of January 21, 2021 through December 31, 2021 include facility rentals, medical and support staff for planning, management, support, and operations; as well as wrap-around services for staff (i.e., meals, travel, lodging). Regular and overtime pay associated with this project is allowable for all staff working under this project and must be billed as a direct charge; timesheets are required documentation and must be available upon request by DOH. Indirect rates are not applicable to these funds. Eligible equipment includes facility infection control measures, personal protective equipment (PPE), storage equipment, coolers, freezers, temperature monitoring devices, portable vaccine units for transportation, supplies such as emergency medical supplies (for emergency medical care needs that may arise in the administration of the vaccine), containers for medical waste, as well as proper storage as needed for canisters of liquid nitrogen or dry ice. Eligible equipment purchase costs should not exceed \$5,000 per piece. Equipment over \$5,000 a piece must be preapproved by the IMT and should be leased rather than purchased. Any diversion from the list of pre-approved expenses will require a narrative on the purchase rationale and will be subject to IMT approval prior to reimbursement. Timesheets are required documentation for all activities related to this project. Staff time-in / time-out must be recorded, as well as a brief description of their activities. A general description of activities is acceptable for those working at the vaccine site; more detailed/specific description is required for those not working at the vaccine site.

DOH Program Contact

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DOH BITV-COVID ED LHJ Allocation-CARES and DOH ELC Allocation Fiscal Contact (Tasks 1 and 2)

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DOH General Mass Vaccination Program and Fiscal Contact (Task 4)

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Exhibit A
Statement of Work
Contract Term: 2018-2021

DOH Program Name or Title: Foundational Public Health Services (FPHS) - Effective July 1, 2021

Local Health Jurisdiction Name: Snohomish Health District

Contract Number: CLH18261

SOW Type: <u>Revision</u>	Revision # (for this SOW) <u>1</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 33%;">Funding Source</th> <th style="width: 33%;">Federal Compliance (check if applicable)</th> <th style="width: 33%;">Type of Payment</th> </tr> <tr> <td>☐ Federal <Select One></td> <td>☐ FFATA (Transparency Act)</td> <td>☐ Reimbursement</td> </tr> <tr> <td>☒ State</td> <td>☐ Research & Development</td> <td>☒ Periodic Distribution</td> </tr> <tr> <td>☐ Other</td> <td></td> <td></td> </tr> </table>	Funding Source	Federal Compliance (check if applicable)	Type of Payment	☐ Federal <Select One>	☐ FFATA (Transparency Act)	☐ Reimbursement	☒ State	☐ Research & Development	☒ Periodic Distribution	☐ Other		
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☐ Federal <Select One>	☐ FFATA (Transparency Act)	☐ Reimbursement												
☒ State	☐ Research & Development	☒ Periodic Distribution												
☐ Other														
Period of Performance: <u>July 1, 2021 through December 31, 2021</u>														

Statement of Work Purpose: The purpose of this statement of work (SOW) is to specify how state funds for Foundational Public Health Services (FPHS) will be used for the period of performance. Per RCW 43.70.512, these funds are for the governmental public health system to deliver FPHS services statewide in the most effective, efficient and equitable manner possible with the funds available.

The FPHS Steering Committee with input from FPHS Subject Matter Expert (SME) Workgroups and the Tribal Technical Workgroup is the decision making body for FPHS funds. For the 2021 – 2023 biennium, the Steering Committee is using an iterative approach to decision making. Determining investments first for SFY22 (July 1, 2021 – June 30, 2022), then for SFY23 (July 1, 2022 – June 30, 2023). This means that additional tasks and/or funds may be added to an LHJ's FPHS SOW as these decisions are made.

These funds are to be used as directed and allocated by the FPHS Steering Committee. As the global COVID-19 pandemic and the public health response to it continues and begins to abate, these FPHS funds can be braided with and used to supplement other short-term pandemic response funding as needed for FPHS activities during this period of performance (07/01/21 12/31/21). Responding to pandemics, epidemics and public health emergencies are foundational services of the governmental public health system.

Note:

The total biennial funding allocation is for the period of July 1, 2021 through June 30, 2023. 2021-2023 biennial funding allocations will be divided into four six-month lump sum amounts that will be disbursed at the beginning of each six month period as follows: July 1, 2021; January 1, 2022; July 1, 2022; January 1, 2023. Each year, the July payment will be disbursed upon completion of the FPHS Annual Report.

The disbursement of funds scheduled for January 1, 2022, July 1, 2022 and January 1, 2023 and deliverable due dates after December 31, 2021 are included in this statement of work for informational purposes only and will be carried forward into a new statement of work in the new consolidated contract term beginning January 1, 2022.

FPHS funds must be spent in the state fiscal year (SFY) in which they are appropriated by the legislature, allocated, and disbursed. Legislative appropriations lapse at the end of each state fiscal year (RCW 43.88.140).

Spending and spending projections must be reported as required by the FPHS Steering Committee. Funds that are projected to be unspent by the close of the state fiscal year must be reallocated per the process developed by the FPHS Steering Committee to assure that all funds appropriated by the legislature can be spent by the governmental public health system to deliver FPHS within the year that the funds are appropriated. Unspent funds revert to the state treasury and must be returned to DOH by July 15th of each year for return to the Office of Financial Management (OFM).

2021-2023 Biennium:

SFY22 (July 1, 2021-June 30, 2022)

SFY23 (July 1, 2022-June 30, 2023)

Revision Purpose: The purpose of this revision is to revise language and add funding and tasks for FFY22.

Chart of Accounts Program Name or Title				CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only)		Current Consideration	Change Increase (+)	Total Consideration
FPHS-LHJ-PROVISO (YR1)				N/A	336.04.25	99202111	07/01/21	12/31/21	600,596	2,549,404	3,150,000
Note: Total Consideration is for SFY22 (07/01/21-06/30/22).									0	0	0
TOTALS									600,596	2,549,404	3,150,000

BARS Expenditure. Code 562.xx	FPHS	Tasks / Activities / Short Description	Funds to provide FPHS in:		SFY22	SFY23	21-23 BIENNium
			Your jurisdiction	Other jurisdictions			
10-17, 20, 21, 23-29, 40-53, 93	All – CD, EPH, CCC, Assessment	Reinforcing Capacity (Assessment, CD, EPH, CCC)	X		1,279,000	1,279,000	2,558,000
10	Assessment	CHA/CHIP	X		30,000	30,000	60,000
20, 21, 23-29, 93	CD	Communicable Disease (CD)	X		497,000	497,000	994,000
24	CD	Hepatitis C	X		164,000	164,000	328,000
40-53, 93	EPH	Environmental Public Health (EPH)	X		1,180,000	1,180,000	2,360,000
TOTAL					\$3,150,000	\$3,150,000	\$6,300,000

Task Number	Task/Activity/Description	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
0	FOUNDATIONAL PUBLIC HEALTH FUNDING – <u>ALL</u>	In coordination with FPHS Steering Committee and Subject Matter Expert (SME) workgroups: - Increase delivery of FPHS services in each jurisdiction and statewide as measured via through FPHS annual reporting indicators, from all agencies receiving FPHS funds, metrics and other data compiled and analyzed by contractors, DOH and Subject Matter Expert (SME) Workgroups. All of which is included as part of Results are published in the annual FPHS Investment Report. FPHS indicator metrics are available here. - Routine reporting of spending and spending projections. Process and reporting template TBD and provided by the FPHS Steering Committee via DOH.		Funds are available beginning July 1, 2021. Half of the annual allocation will be disbursed each July upon receipt completion of the FPHS Annual Report for the previous state fiscal year and the second half will be disbursed each January. Note: Funds must be spent in the state fiscal year (SFY) in which they are appropriated by the legislature, allocated, and disbursed. Unspent funds must be returned to DOH by July 15th of each year for return to OFM.

Task Number	Task/Activity/Description	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
		- FPHS annual reporting (template provided by-the <i>FPHS Steering Committee</i> via DOH) - For SFY22 (07/01/21–06/30/22) <i>FPHS annual reporting (template provided by DOH)</i> - For SFY23 (07/01/22–06/30/23)	By 08/15/22 By 08/15/23	
1.	<u>Reinforcing Capacity</u> <i>These funds are to each LHJ to deliver FPHS in their own jurisdiction – In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, provide FPHS Communicable Disease (CD), Environmental Public Health (EPH), Assessment (Surveillance & Epidemiology) and / or any or all of the other FPHS Cross-cutting Capabilities (CCC) as defined in the most current version of the FPHS definitions.</i>			
2.	<u>Assessment – CHA/CHIP</u> (FPHS definitions G.3) <i>These funds are to each LHJ to deliver FPHS in their own jurisdiction – In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, conduct and complete a comprehensive community health assessment and identify health priorities arising from that assessment, including analysis of health disparities and the social determinants of health as defined in the most current version of the FPHS definitions.</i> - Conduct a local and/or regional comprehensive community health assessment (CHA) every three to five years in conjunction with community partners. - Develop a local and/or regional community health improvement plan (CHIP) in conjunction with community partners. <i>These funds can be used for any CHA/CHIP activity or service (e.g., data analysis, focus groups, report writing, process facilitation) and may be used to contract with other LHJs for staff time or services.</i>			
3.	<u>Communicable Disease (CD)</u> (FPHS definitions C.1, 2, 3, 4, 6) <i>These funds are to each LHJ to deliver FPHS in their own jurisdiction – In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, provide FPHS CD services as defined in the most current version of the FPHS definitions. These funds can (and actually are intended to) be braided with temporary pandemic emergency funding such that when those funds run out, FPHS funds can be used to retain staff there were hired with pandemic emergency funds if the jurisdictions desires to retain them and/or to hire additional staff if needed, and/or contract with other LHJs for staff time or services for delivering FPHS CD. As the pandemic response wains, staff funded with FPHS funds are to shift focus to providing some or all of the FPHS CD services. This includes maintaining access to and use of data systems created during the pandemic and others under development and case investigation and contact tracing for sexually transmitted disease and other communicable and notifiable conditions within the mandated timeframes. Emphasis should be placed on addressing syphilis and gonorrhea cases.</i> - Provide timely, statewide, locally relevant and accurate information statewide and to communities on prevention and control of communicable disease and other notifiable conditions. - Identify statewide and local community assets for the control of communicable diseases and other notifiable conditions, develop and implement a prioritized control plan addressing communicable diseases and other notifiable conditions and seek resources and advocate for high priority prevention and control policies and initiatives regarding communicable diseases and other notifiable conditions. - Promote immunization through evidence-based strategies and collaboration with schools, health care providers and other community partners to increase immunization rates. - Ensure disease surveillance, investigation and control for communicable disease and notifiable conditions in accordance with local, state and federal mandates and guidelines.			

Task Number	Task/Activity/Description	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
4.	Communicable Disease – Hepatitis C (FPHS definitions C.4.o-p) <u>These funds are to select LHJs to deliver FPHS in their own jurisdictions</u> – In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, address Hepatitis C cases in the jurisdiction per guidance developed by the statewide FPHS Communicable Disease Workgroup, including, but not limited to: shared priorities, standardized surveillance, minimum standards of practice, common metrics and staffing models. The allocation of these funds is based on burden of disease using the most current Hepatitis C data. Allocations will be revised biennially using updated data. The priorities for the 2021-2023 biennium (July 2021 – June 2023): • Surveillance – entering labs into Washington Disease Reporting System (WDRS), enter acute cases into WDRS. • Investigation – focus on acute cases: people aged 35 or younger, newly diagnosed, pregnant women, people seen in the ED/inpatient, Black, Indigenous and People of Color or other historically marginalized population, and incorporate Hepatitis B work.			
5.	Environmental Public Health (EPH) (FPHS definitions B.3 & 4) <u>These funds are to each LHJ to deliver services in their own jurisdiction</u> In coordination with the FPHS Steering Committee and Subject Matter Expert (SME) Workgroups, these funds are for each LHJ to deliver FPHSEPH services for which fees cannot be charged in their jurisdiction as defined in the most current version of the FPHS definitions and specifically for: • Develop, implement and enforce laws, rules, policies and procedures for maintaining the health and safety of retail food service inspections and shellfish monitoring, that address environmental public health concerns. (B.3.b) • Develop, implement and enforce laws, rules, policies and procedures for ensuring the health and safety of wastewater and facilities, including onsite septic design and inspections, wastewater treatment and reclaimed water, that address environmental public health concerns. (B.3.e) • Develop, implement and enforce laws, rules, policies and procedures for ensuring the health and safety of solid waste and facilities, including hazardous waste streams (e.g. animal waste, solid waste permitting and solid waste inspections), that address environmental public health concerns. (B.3.f) • Develop, implement and enforce laws, rules, policies and procedures for ensuring the health and safety of schools, including through education and plan review that address environmental public health concerns. (B.3.g) These funds can be used to retain, hire and/or contract with other LHJs for staff time and services and for staff training as needed to provide the following FPHS EPH services that are not appropriately funded with fees. Each LHJ will be responsible to report on their progress on FPHS deliverables even if contracted with other LHJs (FPHS funds are intended to build capacity and not intended to justify the reduction of existing fee revenue): • Food Safety (FPHS definitions B.3.b.) – Respond to food safety concerns that are not appropriately funded such as foodborne illness threats, requests for technical assistance and addressing new and emerging business models. Every local jurisdiction in Washington is expected to respond to foodborne illness outbreaks, food safety inquiries and provide preventative education for the general public and technical assistance. • Sewage Safety (FPHS definitions B.3.e-f) – Respond to sewage concerns and public health threats and provide technical assistance that are not appropriately funded to ensure that sewage is handled appropriately to limit potential exposure to sewage. Every local jurisdiction in Washington is expected to ensure sewage is properly managed. On-Site Septic (OSS) permitting, enforcement and providing technical assistance and education to OSS owners are fee funded activities and should be funded through fees or local government who sets the fees. These FPHS funds provide resources to support activities for which a fee cannot be charged such as: responding to OSS failures, surfacing sewage, OSS safety concerns, and similar issues. These funds can also be used for concerns related to large on-site sewage systems, other OSS-related concerns that do not involve locally permittable systems, and other sewage-related issues, regardless of whether they are related to a fee-for-service activity. Examples of activities FPHS funds can be used for: ◦ Work with partners to educate and inform public on OSS monitoring and maintenance ◦ Work with the public, policy makers and partners to assess needs and develop plans and solutions for wastewater management in their communities. ◦ Respond to complaints, act as needed, and assure that failing OSS are identified and promptly repaired.			

Task Number	Task/Activity/Description	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	○ <i>Conduct Pollution Identification and Correction (PIC) investigations where water quality is impaired to identify failing septic systems and other pollution sources.</i> ○ <i>Ensure that sewage from both OSS and other sources is adequately handled to create barriers to potential exposure to sewage.</i> ○ <i>Adequate qualified staff to evaluate proposals, inspect new installations and repairs, assess cause of OSS failure, and comply with requirements in state law.</i> ● <i>Schools Safety (FPHS definition B.3.g) – Assure safe and effective learning environments for children attending K-12 schools – public, private and parochial. Every local jurisdiction in Washington is expected to work collaboratively with DOH, ESDs and local school districts and use the model program to assure consistency to regularly evaluate each K-12 for health and safety concerns and provide mandated services per WAC 246-366. Initial priorities include:</i> ○ <i>Build partnerships with school officials, local boards of education, parent teacher associations, education service districts, and other school focused entities.</i> ○ <i>Participate with statewide public health groups to standardize school program implementation.</i> ○ <i>Focus on schools that have not previously been inspected to assess current conditions</i> ○ <i>Focus on existing elementary schools for first phase of inspections program</i> ■ <i>Indoor Air Quality</i> ■ <i>Classroom</i> ■ <i>Healthy cleaning and indoor environments</i> ■ <i>Playground</i> ■ <i>Drinking water (lead)</i>			

Program Specific Requirements/Narrative

Special References (RCWs, WACs, etc)

Link to RCW 43.70.512 – RCW 43.70.512: Public health system—Foundational public health services—Intent. (wa.gov)

Link to RCW 43.70.515 – [RCW 43.70.515: Foundational public health services—Funding. \(wa.gov\)](http://wa.gov)

FPHS Definitions

<https://wsalpho.box.com/s/qb6ss10mxbrajx0fla742lw6zcfxzohk>

All FPHS Resources

www.doh.wa.gov/fphs or [FPHS | Powered by Box](#)

Special Instructions

There are two different BARS Revenue Codes for “state flexible funds” to be tracked separately and reported separately on your annual BARS report. These two BARS Revenue Codes and definitions from the State Auditor’s Office (SAO’s) are listed below along with a link to the BARS Manual. 336.04.25 is the new BARS Revenue Code to use for the Foundational Public Health Services (FPHS) funds included in this statement of work.

336.04.24 – County Public Health Assistance

Use this account for the state distribution authorized by the 2013 2ESSB 5034, section 710. The local health jurisdictions are required to provide reports regarding expenditures to the legislature from this revenue source.

336.04.25 – Foundational Public Health Services

Use this account for the funding designated for the local health jurisdictions to provide a set of core services that government is responsible for in all communities in the WA state. This set of core services provides the foundation to support the work of the broader public health system and community partners. At this time the funding from this account is for delivering ANY or all of the FPHS communicable disease services (listed above) and can also be used for the FPHS capabilities that support FPHS communicable disease services as defined in the most current version of FPHS Definitions.

Public Health Budgeting, Accounting and Reporting System (BARS) Resources
www.doh.wa.gov/lhifunding

Deliverables are to be submitted to Marie Flake at marie.flake@doh.wa.gov

DOH Program Contact

Marie Flake, Special Projects, Foundational Public Health Services
Washington State Department of Health
PO Box 47890, Olympia, WA 98504-7890
Mobile Phone 360-951-7566 / Fax 360.236.4024 / marie.flake@doh.wa.gov

Exhibit A
Statement of Work
Contract Term: 2018-2021

DOH Program Name or Title: Infectious Disease Prevention Section (IDPS) - Effective July 1, 2021

Local Health Jurisdiction Name: Snohomish Health District

Contract Number: CLH18261

SOW Type: Revision **Revision # (for this SOW)** 1

Period of Performance: July 1, 2021 through December 31, 2021

Funding Source ☒ Federal Subrecipient ☒ State ☒ Other	Federal Compliance (check if applicable) ☒ FFATA (Transparency Act) ☐ Research & Development	Type of Payment ☒ Reimbursement ☐ Fixed Price
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Statement of Work Purpose: The purpose of this statement of work is to provide infectious disease (HIV, STD and Adult Viral Hepatitis) prevention services.

Revision Purpose: The purpose of this revision is to update the funding source for HIV Positive (+) Prevention Activities as well as add funding for STD Prevention Supplemental (PCHD) and to remove the Viral Hepatitis Surveillance task and funding due to the grant ending.

Chart of Accounts Program Name or Title	CFDA #	BARS Revenue Code	Master Index Code	Funding Period (LHJ Use Only) Start Date End Date	Current Consideration	Change Increase (+)	Total Consideration
STATE DISEASE CONTROL AND PREV - FPH	N/A	334.04.91	12411100	07/01/21 12/31/21	60,032	0	60,032
FFY21 STD PREVENTION [PCHD]-FPH	93.977	333.93.97	12411215	07/01/21 12/31/21	34,560	0	34,560
FFY21 HIV PREVENTION - FPH	93.940	333.93.94	12411210	07/01/21 12/31/21	55,331	0	55,331
FFY21 VIRAL HEPATITIS SURVEILLANCE-FPH	93.270	333.93.27	12507210	07/01/21 12/31/21	16,329	-16,329	0
FFY21 ADAP REBATE (LOCAL) 19-21	N/A	334.04.98	12618590	07/01/21 12/31/21	15,716	-15,716	0
RW FFY21 GRANT YEAR LOCAL (REBATE)	N/A	334.04.98	1261851C	07/01/21 12/31/21	0	15,716	15,716
FFY21 STD PREV SUPPLEMENTAL [PCHD]	93.977	333.93.97	12408310	07/01/21 12/31/21	0	163,367	163,367
TOTALS					181,968	147,038	329,006

Task	Task/Activity/Description	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
HIV/STD Prevention				
HIV/STD Prevention, Treatment, and Surveillance	Deliver partner services to people diagnosed with HIV/STD per CDC and state guidelines. Ensure timely, correct reporting, testing and treatment of STDs or exposure to STDs for diagnosed patients and identified contacts.	Complete and report actual deliverables in the appropriate data reporting system. Monthly invoice with appropriate back-up documentation. Quarterly Reports are Required - Deliverables for this reporting period have	Agency must adhere to DOH Infectious Disease (ID) Reporting Requirements	\$60,032 - MI 12411100 – State Disease Control & Prev - FPH \$60,032 for 07/01/21-12/31/21

Task	Task/Activity/Description	Deliverables/Outcomes	Due Date/Time Frame	Payment Information and/or Amount
	Refer at-risk people identified through HIV/STD testing and/or partner services for medical and supportive services to prevent HIV acquisition.	been identified and can be referenced in LHJ's Quarterly Report.		\$55,331 – MI 12411210- HIV Prevention (Cat A) \$55,331 for 07/01/21-12/31/21 \$34,560 – 12411215 - STD Prevention (PCHD) - FPH \$34,560 for 07/01/21-12/31/21 <i>\$163,367 – MI 12408310 – STD Prevention Supp (PCHD)</i> <i>\$163,367 for 07/01/21-12/31/21</i>
HIV Positive (+) Prevention Activities	Provide services to clients who are diagnosed with and/or living with HIV Deliver partner services to people diagnosed with HIV. Ensure timely, correct reporting of people diagnosed with HIV. Refer and link people diagnosed with HIV to medical and supportive services to promote viral suppression.	Information reported into Public Health Issue Management System-Sexually Transmitted Disease (PHIMS-STD) and/or the Washington Data Reporting System (Maven/WDRS). Quarterly Reports are Required - Deliverables for this reporting period have been identified and can be referenced in LHJ's Quarterly Report.	Agency must adhere to DOH ID Reporting Requirements	\$15,716 – MI 12618590 – Rebates \$15,716 for 07/01/21-12/31/21 <i>\$15,716 – MI 1261851C – RW Rebate</i> <i>\$15,716 for 07/01/21-12/31/21</i>
<i>Adult Viral Hepatitis Surveillance</i>	<i>The LHJ shall perform the tasks related to strengthening viral hepatitis surveillance, promoting HCV and HBV jail testing.</i>	<i>Complete and report actual deliverables in the appropriate data reporting system</i>	<i>Deliverables will be completed by the end of the period of performance.</i>	\$16,329 – MI 12507210 – Viral Hep-Surv <i>\$16,329 for 07/01/21-12/31/21</i>

***For Information Only:**

Funding is not tied to the revised Standards/Measures listed here. This information may be helpful in discussions of how program activities might contribute to meeting a Standard/Measure. More detail on these and/or other Public Health Accreditation Board (PHAB) Standards/Measures that may apply can be found at: <http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf>

Program Specific Requirements/Narrative

Federal Funding Accountability and Transparency Act (FFATA)

This statement of work is supported by federal funds that require compliance with the Federal Funding Accountability and Transparency Act (FFATA or the Transparency Act). The purpose of the Transparency Act is to make information available online so the public can see how the federal funds are spent.

To comply with this act and be eligible to perform the activities in this statement of work, the LHJ must have a Data Universal Numbering System (DUNS®) number.

Information about the LHJ and this statement of work will be made available on USASpending.gov by DOH as required by P.L. 109-282.

Fiscal Guidance

- i) **Funding** –The LHJ shall submit all claims for payment for costs due and payable under this statement of work by January 25, 2022. DOH will pay belated claims at its discretion, contingent upon the availability of funds.
- ii) The LHJ agrees to reimburse DOH for expenditures billed to the DOH for costs that are later determined through audit or monitoring to be disallowed under the requirements of 2 CFR Part 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.
- iii) **Submission of Invoice Vouchers** – On a monthly basis, the LHJ shall submit correct A19-1A invoice vouchers amounts billable to DOH under this statement of work. **All invoice vouchers must be submitted by the 25th of the following month.**

The LHJ shall use and adhere to the DOH Infectious Disease Reimbursement Guidelines and Forms when submitting invoice voucher payment requests to DOH.

DOH Fiscal Contact

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PO Box 47840, Olympia, WA 98504-7841
360-236-3351/Fax: 360-664-2216
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DOH Program Contact

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DOH, Infectious Disease Prevention
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Zandt.Bryan@doh.wa.gov

Snohomish Health District

EXHIBIT B-24
ALLOCATIONS
Contract Term: 2018-2021

Contract Number: CLH18261
Date: September 15, 2021

Indirect Rate as of January 2018: 36.29% Prevention Svcs; 37.31% Environmental Hlth; 34.25% Admin Direct & PHEPR
Indirect Rate as of January 2019: 53.63% Prevention Svcs; 38.60% Environmental Hlth; 30.37% Admin Direct & PHEPR
Indirect Rate as of January 2020: 45.70%
Indirect Rate as of January 2021: 47.10%

Chart of Accounts Program Title	Federal Award Identification #	Amend #	CFDA *	BARS Revenue Code**	Statement of Work		DOH Use Only		Amount	Funding Period Sub Total	Chart of Accounts Total
					Funding Period Start Date	Funding Period End Date	Chart of Accounts Funding Period Start Date	Chart of Accounts Funding Period End Date			
FFY20 USDA BFPC Prog Mgmt	207WAWA1W5003	Amd 12	10.557	333.10.55	10/01/19	09/30/20	10/01/19	09/30/20	\$6,062	\$6,062	\$6,062
FFY19 CSS USDA BF Peer Counseling	197WAWA1W5003	Amd 9	10.557	333.10.55	10/01/19	09/30/20	10/01/18	09/30/20	\$2,021	\$2,021	\$16,166
FFY19 CSS USDA BF Peer Counseling	197WAWA1W5003	Amd 6	10.557	333.10.55	10/01/18	09/30/19	10/01/18	09/30/20	\$6,062	\$6,062	
FFY18 CSS USDA BF Peer Counseling	187WAWA1W5003	Amd 4	10.557	333.10.55	01/01/18	09/30/19	10/01/17	09/30/19	\$2,021	\$8,083	
FFY18 CSS USDA BF Peer Counseling	187WAWA1W5003	N/A, Amd 4	10.557	333.10.55	01/01/18	09/30/19	10/01/17	09/30/18	\$6,062		
FFY21 USDA WIC Program Mgmt CSS	217WAWA7W1003	Amd 15	10.557	333.10.55	10/01/20	12/31/20	10/01/20	12/31/20	(\$204,750)	\$0	\$1,559,850
FFY21 USDA WIC Program Mgmt CSS	217WAWA7W1003	Amd 6	10.557	333.10.55	10/01/20	12/31/20	10/01/20	12/31/20	(\$2,765)		
FFY21 USDA WIC Program Mgmt CSS	217WAWA7W1003	N/A	10.557	333.10.55	10/01/20	12/31/20	10/01/20	12/31/20	\$207,515		
FFY20 USDA WIC Program Mgmt CSS	207WAWA7W1003	Amd 15	10.557	333.10.55	10/01/19	09/30/20	10/01/19	09/30/20	(\$819,000)	\$0	
FFY20 USDA WIC Program Mgmt CSS	207WAWA7W1003	Amd 6	10.557	333.10.55	10/01/19	09/30/20	10/01/19	09/30/20	(\$11,060)		
FFY20 USDA WIC Program Mgmt CSS	207WAWA7W1003	N/A	10.557	333.10.55	10/01/19	09/30/20	10/01/19	09/30/20	\$830,060		
FFY19 CSS USDA WIC Program Mgmt	187WAWA7W1003	Amd 6	10.557	333.10.55	10/01/18	09/30/19	10/01/18	09/30/19	(\$23,295)	\$808,205	
FFY19 CSS USDA WIC Program Mgmt	187WAWA7W1003	Amd 5	10.557	333.10.55	10/01/18	09/30/19	10/01/18	09/30/19	\$1,440		
FFY19 CSS USDA WIC Program Mgmt	187WAWA7W1003	N/A	10.557	333.10.55	10/01/18	09/30/19	10/01/18	09/30/19	\$830,060		
FFY18 CSS USDA WIC Program Mgmt	187WAWA7W1003	Amd 2	10.557	333.10.55	01/01/18	09/30/18	10/01/17	09/30/18	\$1,400	\$751,645	
FFY18 CSS USDA WIC Program Mgmt	187WAWA7W1003	Amd 1	10.557	333.10.55	01/01/18	09/30/18	10/01/17	09/30/18	\$127,700		
FFY18 CSS USDA WIC Program Mgmt	187WAWA7W1003	N/A	10.557	333.10.55	01/01/18	09/30/18	10/01/17	09/30/18	\$622,545		
FFY21 USDA WIC Client Svcs Contracts	217WAWA7W1003	Amd 16	10.557	333.10.55	10/01/20	12/31/20	10/01/20	12/31/20	(\$204,750)	\$0	\$1,328,425
FFY21 USDA WIC Client Svcs Contracts	217WAWA7W1003	Amd 15	10.557	333.10.55	10/01/20	12/31/20	10/01/20	12/31/20	\$204,750		
FFY20 USDA WIC Client Svcs Contracts	207WAWA7W1003	Amd 16	10.557	333.10.55	10/01/19	09/30/20	10/01/19	09/30/20	\$357,565	\$1,328,425	
FFY20 USDA WIC Client Svcs Contracts	207WAWA7W1003	Amd 15	10.557	333.10.55	10/01/19	09/30/20	10/01/19	09/30/20	\$819,000		
FFY20 USDA WIC Client Svcs Contracts	207WAWA7W1003	Amd 13	10.557	333.10.55	10/01/19	09/30/20	10/01/19	09/30/20	\$149,860		
FFY20 USDA WIC Client Svcs Contracts	207WAWA7W1003	Amd 12	10.557	333.10.55	10/01/19	09/30/20	10/01/19	09/30/20	\$2,000		
FFY19 CSS USDA FMNP Prog Mgmt	197WAWA7Y8604	Amd 8	10.572	333.10.57	01/01/19	09/30/19	10/01/18	09/30/19	\$920	\$920	\$1,861
FFY18 CSS USDA FMNP Prog Mgmt	187WAWA7Y8604	Amd 2	10.572	333.10.57	01/01/18	09/30/18	10/01/17	09/30/18	\$941	\$941	
FFY16 Cascades USDA WIC Prog Mgmt-MIS SG	16157WAWA6W522	Amd 6, 8	10.578	333.10.57	10/01/18	09/30/19	03/11/16	09/30/19	\$1,265	\$1,265	\$1,265
FFY19 MIS Tech Grant	197WAWA1G5212	Amd 8	10.578	333.10.57	10/01/19	09/30/20	10/01/18	09/30/20	\$230	\$230	\$230
BITV-COVID Ed LHJ Allocation-CARES	NGA Not Received	Amd 24	21.019	333.21.01	07/01/20	06/30/21	07/01/20	06/30/21	(\$2,781,584)	\$1,649,220	\$1,649,220
BITV-COVID Ed LHJ Allocation-CARES	NGA Not Received	Amd 19, 22, 24	21.019	333.21.01	07/01/20	06/30/21	07/01/20	06/30/21	\$3,323,103		
BITV-COVID Ed LHJ Allocation-CARES	NGA Not Received	Amd 17, 19, 22, 24	21.019	333.21.01	07/01/20	06/30/21	07/01/20	06/30/21	\$1,107,701		
SS Community Outreach PN	NGA Not Received	Amd 18, 21	21.019	333.21.01	07/01/20	06/30/21	07/01/20	06/30/21	\$120,000	\$120,000	\$120,000

Snohomish Health District

EXHIBIT B-24
ALLOCATIONS
Contract Term: 2018-2021

Contract Number: CLH18261
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					Funding Period Start Date	Funding Period End Date	Chart of Accounts Funding Period Start Date	Chart of Accounts Funding Period End Date			
FFY17 EPR PHEP BP1 Cities Readiness Init	NU90TP921889-01	Amd 2	93.069	333.93.06	01/01/18	06/30/18	07/01/17	07/02/18	\$61,402	\$113,717	\$113,717
FFY17 EPR PHEP BP1 Cities Readiness Init	NU90TP921889-01	N/A	93.069	333.93.06	01/01/18	06/30/18	07/01/17	07/02/18	\$52,315		
FFY17 EPR PHEP BP1 LHJ Funding	NU90TP921889-01	N/A	93.069	333.93.06	01/01/18	06/30/18	07/01/17	07/02/18	\$216,083	\$216,083	\$216,083
FFY18 EPR PHEP BP1 Supp Cities Readiness	NU90TP921889-01	Amd 4	93.069	333.93.06	07/01/18	06/30/19	07/01/18	06/30/19	\$130,010	\$130,010	\$130,010
FFY18 EPR PHEP BP1 Supp LHJ Funding	NU90TP921889-01	Amd 5	93.069	333.93.06	07/01/18	06/30/19	07/01/18	06/30/19	\$9,638	\$535,318	\$535,318
FFY18 EPR PHEP BP1 Supp LHJ Funding	NU90TP921889-01	Amd 4	93.069	333.93.06	07/01/18	06/30/19	07/01/18	06/30/19	\$525,680		
FFY21 PHEP BP3 LHJ Funding	NU90TP922043	Amd 23	93.069	333.93.06	07/01/21	12/31/21	07/01/21	06/30/22	\$321,191	\$321,191	\$1,391,827
FFY20 PHEP BP2 LHJ Funding	NU90TP922043	Amd 18	93.069	333.93.06	07/01/20	06/30/21	07/01/20	06/30/21	\$214,127	\$535,318	
FFY20 PHEP BP2 LHJ Funding	NU90TP922043	Amd 17, 18	93.069	333.93.06	07/01/20	06/30/21	07/01/20	06/30/21	\$321,191		
FFY19 PHEP BP1 LHJ Funding	NU90TP922043	Amd 10	93.069	333.93.06	07/01/19	06/30/20	07/01/19	06/30/20	\$535,318	\$535,318	
FFY21 CDC Cities Readiness BP3	NU90TP922043	Amd 23	93.069	333.93.06	07/01/21	12/31/21	07/01/21	06/30/22	\$79,242	\$79,242	\$79,242
FFY20 PHEP Cities Readiness BP2	NU90TP922043	Amd 18	93.069	333.93.06	07/01/20	06/30/21	07/01/20	06/30/21	\$52,828	\$132,070	\$264,290
FFY20 PHEP Cities Readiness BP2	NU90TP922043	Amd 17, 18	93.069	333.93.06	07/01/20	06/30/21	07/01/20	06/30/21	\$79,242		
FFY19 PHEP Cities Readiness BP1	NU90TP922043	Amd 10	93.069	333.93.06	07/01/19	06/30/20	07/01/19	06/30/20	\$132,220	\$132,220	
FFY21 TB Elimination-FPH	NU52PS910221	Amd 21	93.116	333.93.11	01/01/21	12/31/21	01/01/21	12/31/21	\$95,267	\$95,267	\$391,764
FFY20 TB Elimination-FPH	NU52PS910221-01-00	Amd 15	93.116	333.93.11	01/01/20	12/31/20	01/01/20	12/31/20	\$82,481	\$103,101	
FFY20 TB Elimination-FPH	NU52PS910221-01-00	Amd 13	93.116	333.93.11	01/01/20	12/31/20	01/01/20	12/31/20	\$20,620		
FFY19 TB Elimination-FPH	5NU52PS004674-05-00	Amd 7	93.116	333.93.11	01/01/19	12/31/19	01/01/19	12/31/19	\$98,489	\$98,489	
FFY18 TB Elimination-FPH	5NU52PS004674-04-00	Amd 4	93.116	333.93.11	01/01/18	11/30/18	01/01/18	12/31/18	\$47,336	\$94,907	
FFY18 TB Elimination-FPH	5NU52PS004674-04-00	Amd 3	93.116	333.93.11	01/01/18	11/30/18	01/01/18	12/31/18	\$23,844		
FFY18 TB Elimination-FPH	5NU52PS004674-04-00	Amd 1	93.116	333.93.11	01/01/18	11/30/18	01/01/18	12/31/18	\$23,727		
FFY21 Overdose Data to Action Prev	NU17CE925007	Amd 23	93.136	333.93.13	09/01/21	12/31/21	09/01/21	08/31/22	\$150,000	\$150,000	\$461,688
FFY20 Overdose Data to Action Prev	NU17CE925007	Amd 19	93.136	333.93.13	09/01/20	08/31/21	09/01/20	08/31/21	\$11,688	\$161,688	
FFY20 Overdose Data to Action Prev	NU17CE925007	Amd 17, 19	93.136	333.93.13	09/01/20	08/31/21	09/01/20	08/31/21	\$150,000		
FFY19 Overdose Data to Action Prev	NU17CE925007	Amd 11	93.136	333.93.13	09/01/19	08/31/20	09/01/19	08/31/20	\$150,000	\$150,000	
FFY18 Prescription Drug OD-Supp	NU17CE002734	Amd 4	93.136	333.93.13	09/01/18	08/31/19	09/01/18	08/31/19	\$141,530	\$141,530	\$324,696
FFY17 Prescription Drug OD-Supp	U17CE002734	Amd 3	93.136	333.93.13	01/01/18	08/31/18	09/01/17	08/31/18	\$136,588	\$183,166	
FFY17 Prescription Drug OD-Supp	U17CE002734	N/A	93.136	333.93.13	01/01/18	08/31/18	09/01/17	08/31/18	\$46,578		
FFY17 317 Ops	5NH23IP000762-05-00	N/A	93.268	333.93.26	01/01/18	06/30/18	04/01/17	06/30/18	\$20,148	\$20,148	\$20,148

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FFY17 AFI	5NH23IP000762-05-00	Amd 2, 4	93.268	333.93.26	07/01/18	06/30/19	07/01/18	06/30/19	\$74,468	\$74,468	\$104,477
FFY17 AFI	5NH23IP000762-05-00	N/A	93.268	333.93.26	01/01/18	06/30/18	04/01/17	06/30/18	\$30,009	\$30,009	
FFY21 COVID19 Vaccine Services-CARES	NH23IP922619	Amd 22	93.268	333.93.26	07/01/20	12/31/21	07/01/20	12/31/21			
FFY21 COVID19 Vaccine Services-CARES	NH23IP922619	Amd 20	93.268	333.93.26	07/01/20	12/31/21	07/01/20	12/31/21	(\$2,860,603)	\$117,570	\$117,570
FFY21 COVID19 Vaccine Services-CARES	NH23IP922619	Amd 19, 20	93.268	333.93.26	07/01/20	12/31/21	07/01/20	12/31/21	\$2,860,603		
									\$117,570		
COVID19 Vaccines	NH23IP922619	Amd 24	93.268	333.93.26	07/01/20	12/31/21	07/01/20	12/31/21	\$5,000	\$2,865,603	\$2,865,603
COVID19 Vaccines	NH23IP922619	Amd 22	93.268	333.93.26	07/01/20	12/31/21	07/01/20	12/31/21	\$2,860,603		
FFY21 Enhanced Influenza Coverage CARES	NH23IP922619	Amd 18	93.268	333.93.26	07/01/20	06/30/21	06/05/20	06/30/21	\$22,575	\$45,150	\$45,150
FFY21 Enhanced Influenza Coverage CARES	NH23IP922619	Amd 17, 18	93.268	333.93.26	07/01/20	06/30/21	06/05/20	06/30/21	\$22,575		
FFY21 Improving Vaccinations AA1	NH23IP922619	Amd 18	93.268	333.93.26	07/01/20	06/30/21	07/01/20	06/30/21	\$21,420	\$42,840	\$76,190
FFY21 Improving Vaccinations AA1	NH23IP922619	Amd 17, 18	93.268	333.93.26	07/01/20	06/30/21	07/01/20	06/30/21	\$21,420		
FFY20 Improving Vaccinations AA1	NH23IP922619	Amd 12	93.268	333.93.26	11/01/19	06/30/20	07/01/19	06/30/20	\$33,350	\$33,350	
FFY17 Increasing Immunization Rates	NH23IP000762	Amd 3, 4	93.268	333.93.26	07/01/18	06/30/19	07/01/18	06/30/19	\$45,150	\$45,150	\$45,150
FFY22 PPHF Ops	NH23IP922619	Amd 23	93.268	333.93.26	07/01/21	12/31/21	07/01/21	06/30/22	\$42,840	\$42,840	\$128,840
FFY22 PPHF Ops	NH23IP922619	Amd 22	93.268	333.93.26	07/01/21	12/31/21	07/01/21	06/30/22	\$21,500	\$21,500	
FFY21 PPHF Ops	NH23IP922619	Amd 18	93.268	333.93.26	07/01/20	06/30/21	07/01/20	06/30/21	\$10,750	\$21,500	
FFY21 PPHF Ops	NH23IP922619	Amd 16, 18	93.268	333.93.26	07/01/20	06/30/21	07/01/20	06/30/21	\$10,750		
FFY20 PPHF Ops	NH23IP922619	Amd 9	93.268	333.93.26	07/01/19	06/30/20	07/01/19	06/30/20	\$21,500	\$21,500	
FFY17 PPHF Ops	NH23IP000762	Amd 3, 4	93.268	333.93.26	07/01/18	06/30/19	07/01/18	06/30/19	\$21,500	\$21,500	
FFY22 VFC IQIP	NH23IP922619	Amd 22	93.268	333.93.26	07/01/21	12/31/21	07/01/21	12/31/21	\$74,468	\$74,468	\$219,116
FFY21 VFC IQIP	NH23IP922619	Amd 18	93.268	333.93.26	07/01/20	06/30/21	07/01/20	06/30/21	\$37,234	\$74,468	
FFY21 VFC IQIP	NH23IP922619	Amd 16, 18	93.268	333.93.26	07/01/20	06/30/21	07/01/20	06/30/21	\$37,234		
FFY20 VFC IQIP	NH23IP922619	Amd 9	93.268	333.93.26	07/01/19	06/30/20	07/01/19	06/30/20	\$70,180	\$70,180	
FFY22 VFC Ops	NH23IP922619	Amd 23	93.268	333.93.26	07/01/21	12/31/21	07/01/21	06/30/22	\$45,150	\$45,150	\$149,929
FFY21 VFC Ops	NH23IP922619	Amd 18	93.268	333.93.26	07/01/20	06/30/21	07/01/20	06/30/21	\$22,575	\$45,150	
FFY21 VFC Ops	NH23IP922619	Amd 16, 18	93.268	333.93.26	07/01/20	06/30/21	07/01/20	06/30/21	\$22,575		
FFY20 VFC Ops	NH23IP922619	Amd 9	93.268	333.93.26	07/01/19	06/30/20	07/01/19	06/30/20	\$45,150	\$45,150	
FFY17 VFC Ops	5NH23IP000762-05-00	N/A	93.268	333.93.26	01/01/18	06/30/18	04/01/17	06/30/18	\$14,479	\$14,479	
FFY20 VPD Outbreak Response BB1	NH23IP922619	Amd 13	93.268	333.93.26	09/01/19	06/30/20	07/01/19	06/30/20	\$14,000	\$14,000	\$14,000

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FFY21 Viral Hepatitis Surveillance-FPH	NU51PS005171	Amd 24	93.270	333.93.27	07/01/21	12/31/21	05/01/21	04/30/22	(\$16,329)	\$0	\$136,095
FFY21 Viral Hepatitis Surveillance-FPH	NU51PS005171	Amd 22	93.270	333.93.27	07/01/21	12/31/21	05/01/21	04/30/22	\$16,329		
FFY21 Viral Hepatitis Surveillance-FPH	NU51PS005171	Amd 18	93.270	333.93.27	05/01/21	06/30/21	05/01/21	04/30/22	\$5,445	\$5,445	
FFY20 Viral Hepatitis Surveillance-FPH	NU51PS005102	Amd 18	93.270	333.93.27	07/01/20	04/30/21	05/01/20	04/30/21	\$16,329	\$32,658	
FFY20 Viral Hepatitis Surveillance-FPH	NU51PS005102	Amd 16, 18	93.270	333.93.27	07/01/20	04/30/21	05/01/20	04/30/21	\$16,329		
FFY19 Viral Hepatitis Surveillance-FPH	NU51PS005133	Amd 13	93.270	333.93.27	07/01/19	04/30/20	05/01/19	04/30/20	\$5,445	\$32,658	
FFY19 Viral Hepatitis Surveillance-FPH	NU51PS005133	Amd 9	93.270	333.93.27	07/01/19	04/30/20	05/01/19	04/30/20	\$27,213		
FFY18 Viral Hepatitis Surveillance-FPH	5NU51PS005133-02-00	Amd 5	93.270	333.93.27	05/01/18	12/31/18	05/01/18	04/30/19	\$32,667	\$32,667	
FFY17 Viral Hepatitis Surveillance-FPH	6NU51PS005102-02-03	Amd 2	93.270	333.93.27	01/01/18	04/30/18	05/01/17	04/30/18	\$32,667	\$32,667	
FFY19 Tobacco Prevention	U58DP006004	Amd 9	93.305	333.93.30	03/29/19	04/28/20	03/29/19	04/28/20	\$37,772	\$37,772	\$73,979
FFY19 Tobacco Prevention	U58DP006004	Amd 9	93.305	333.93.30	03/29/19	06/30/19	03/29/19	03/28/20	(\$9,443)	\$0	
FFY19 Tobacco Prevention	NU58DP006004	Amd 8	93.305	333.93.30	03/29/19	06/30/19	03/29/19	03/28/20	\$9,443		
FFY18 Tobacco Prevention	U58DP006004	Amd 2	93.305	333.93.30	03/29/18	03/28/19	03/29/18	03/28/19	\$36,207	\$36,207	
FFY19 COVID CARES	NU50CK000515	Amd 16, 19	93.323	333.93.32	06/01/20	12/31/21	06/01/20	12/31/21	\$746,488	\$746,488	\$746,488
FFY19 ELC COVID Ed LHJ Allocation	NU50CK000515	Amd 20	93.323	333.93.32	01/01/21	12/31/21	01/01/21	12/31/21	\$3,993,137	\$3,993,137	\$3,993,137
FFY20 ELC EDE LHJ Allocation	NU50CK000515	Amd 24	93.323	333.93.32	01/15/21	12/31/21	01/15/21	12/31/21	\$2,981,584	\$11,911,219	\$11,911,219
FFY20 ELC EDE LHJ Allocation	NU50CK000515	Amd 20	93.323	333.93.32	01/15/21	12/31/21	01/15/21	12/31/21	\$8,929,635		
FFY20 Vector-borne T2&3 Epi ELC FPH	NU50CK000515	Amd 22	93.323	333.93.32	06/01/21	12/31/21	06/01/21	12/31/21	\$3,000	\$3,000	\$3,000
FFY18 PH Crisis Resp-Biosurveillance	NU90TP921990	Amd 9, 12	93.354	333.93.35	09/01/18	03/29/20	09/01/18	11/29/19	\$2,592	\$32,592	\$32,592
FFY18 PH Crisis Resp-Biosurveillance	NU90TP921990	Amd 5, 9, 12	93.354	333.93.35	09/01/18	03/29/20	09/01/18	11/29/19	\$30,000		
FFY18 PH Crisis Resp-CntrMeasures	NU90TP921990	Amd 9, 12	93.354	333.93.35	09/01/18	03/29/20	09/01/18	11/29/19	(\$28,912)	\$127,513	\$127,513
FFY18 PH Crisis Resp-CntrMeasures	NU90TP921990	Amd 5, 9, 12	93.354	333.93.35	09/01/18	03/29/20	09/01/18	11/29/19	\$156,425		
FFY18 PH Crisis Resp-Incident Mgmt	NU90TP921990	Amd 9, 12	93.354	333.93.35	09/01/18	03/29/20	09/01/18	11/29/19	\$5,151	\$91,911	\$91,911
FFY18 PH Crisis Resp-Incident Mgmt	NU90TP921990	Amd 5, 9, 12	93.354	333.93.35	09/01/18	03/29/20	09/01/18	11/29/19	\$86,760		
FFY18 PH Crisis Resp-Infomtn Mgmt	NU90TP921990	Amd 9, 12	93.354	333.93.35	09/01/18	03/29/20	09/01/18	11/29/19	\$21,169	\$70,859	\$70,859
FFY18 PH Crisis Resp-Infomtn Mgmt	NU90TP921990	Amd 5, 9, 12	93.354	333.93.35	09/01/18	03/29/20	09/01/18	11/29/19	\$49,690		
FFY21 Tobacco-Vape Prev Comp 1	NU58DP006808	Amd 22	93.387	333.93.38	04/29/21	12/31/21	04/29/21	12/31/21	\$37,772	\$75,544	\$75,544
FFY20 Tobacco-Vape Prev Comp 1	NU58DP006808	Amd 18	93.387	333.93.38	07/01/20	04/28/21	06/29/20	04/28/21	\$18,886		
FFY20 Tobacco-Vape Prev Comp 1	NU58DP006808	Amd 17, 18	93.387	333.93.38	07/01/20	04/28/21	06/29/20	04/28/21	\$18,886		

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FFY16 PPHF Adolescent AFIX	1NH23IP922562-01-00	Amd 2	93.733	333.93.73	01/01/18	08/31/18	09/30/16	09/29/18	(\$14,500)	\$0	\$0
FFY16 PPHF Adolescent AFIX	1NH23IP922562-01-00	N/A	93.733	333.93.73	01/01/18	08/31/18	09/30/16	09/29/18	\$14,500		
FFY18 PHBG Tobacco PPHF	NB01OT009234	Amd 4	93.758	333.93.75	10/01/18	09/30/19	10/01/18	09/30/19	\$40,000	\$40,000	\$71,458
FFY17 PHBG Tobacco PPHF	NB01OT00918	Amd 2, 3	93.758	333.93.75	01/01/18	09/29/18	07/01/17	09/30/18	\$11,458	\$31,458	
FFY17 PHBG Tobacco PPHF	NB01OT00918	N/A, Amd 3	93.758	333.93.75	01/01/18	09/29/18	07/01/17	09/30/18	\$20,000		
FFY15 ASPR HPP Ebola Part A	U3REPI50480	Amd 12	93.817	333.93.81	07/01/19	05/17/20	05/18/15	05/17/20	\$18,595	\$23,595	\$23,595
FFY15 ASPR HPP Ebola Part A	U3REPI50480	Amd 10	93.817	333.93.81	07/01/19	05/17/20	05/18/15	05/17/20	\$5,000		
FFY15 EPR HPP Ebola Part A Prep & Resp	U3REPI50480	Amd 5	93.817	333.93.81	07/01/18	06/30/19	07/01/18	06/30/19	\$24,201	\$29,201	\$64,460
FFY15 EPR HPP Ebola Part A Prep & Resp	U3REPI50480	Amd 4	93.817	333.93.81	07/01/18	06/30/19	07/01/18	06/30/19	\$5,000		
FFY15 EPR HPP Ebola Part A Prep & Resp	U3REPI50480	Amd 2	93.817	333.93.81	01/01/18	06/30/18	05/18/15	05/17/20	\$30,259	\$35,259	
FFY15 EPR HPP Ebola Part A Prep & Resp	U3REPI50480	N/A	93.817	333.93.81	01/01/18	06/30/18	05/18/15	05/17/20	\$5,000		
FFY18 EPR BP1 Supp Healthcare System Prep	NU90TP921889-01	Amd 4	93.889	333.93.88	07/01/18	06/30/19	07/01/18	06/30/19	\$50,000	\$50,000	\$282,045
FFY17 EPR HPP BP1 Healthcare Sys Prep	NU90TP921889-01	Amd 2	93.889	333.93.88	01/01/18	06/30/18	07/01/17	07/02/18	\$122,757	\$232,045	
FFY17 EPR HPP BP1 Healthcare Sys Prep	NU90TP921889-01	N/A	93.889	333.93.88	01/01/18	06/30/18	07/01/17	07/02/18	\$109,288		
FFY21 HIV Prevention-FPH	NU62PS924528	Amd 22	93.940	333.93.94	07/01/21	12/31/21	01/01/21	12/31/21	\$55,331	\$55,331	\$625,824
FFY21 HIV Prevention-FPH	NU62PS924528	Amd 18	93.940	333.93.94	01/01/21	06/30/21	01/01/21	12/31/21	\$55,331	\$55,331	
FFY20 HIV Prevention-FPH	NU62PS924528	Amd 16	93.940	333.93.94	07/01/20	12/31/20	01/01/20	12/31/20	\$55,331	\$55,331	
FFY20 HIV Prevention-FPH	NU62PS924528	Amd 12	93.940	333.93.94	01/01/20	06/30/20	01/01/20	06/30/20	(\$44,669)		
FFY20 HIV Prevention-FPH	NU62PS924528	Amd 9	93.940	333.93.94	01/01/20	06/30/20	01/01/20	06/30/20	\$100,000	\$100,000	
FFY19 HIV Prevention-FPH	NU62PS924528	Amd 9	93.940	333.93.94	07/01/19	12/31/19	01/01/19	12/31/19	\$100,000	\$100,000	
FFY19 HIV Prevention	NU62PS924528	Amd 6	93.940	333.93.94	01/01/19	06/30/19	01/01/19	12/31/19	\$100,000	\$100,000	
FFY18 HIV Prevention	6NU62PS924528-01-03	Amd 5	93.940	333.93.94	01/01/18	12/31/18	01/01/18	12/31/18	\$4,500	\$204,500	
FFY18 HIV Prevention	6NU62PS924528-01-03	Amd 2	93.940	333.93.94	01/01/18	12/31/18	01/01/18	12/31/18	\$200,000		
FFY18 STD Prevention (AAPPS)	6NH25PS004364-05-01	Amd 2	93.977	333.93.97	01/01/18	12/31/18	01/01/18	12/31/18	\$75,899	\$75,899	\$75,899
FFY21 STD Prevention (PCHD)-FPH	NH25PS005146	Amd 22	93.977	333.93.97	07/01/21	12/31/21	01/01/21	12/31/21	\$34,560	\$34,560	\$214,820
FFY21 STD Prevention (PCHD)-FPH	NH25PS005146	Amd 18	93.977	333.93.97	01/01/21	06/30/21	01/01/21	12/31/21	\$35,250	\$35,250	
FFY20 STD Prevention (PCHD)-FPH	NH25PS005146	Amd 16	93.977	333.93.97	07/01/20	12/31/20	01/01/20	12/31/20	\$34,560	\$34,560	
FFY20 STD Prevention (PCHD)-FPH	NH25PS005146	Amd 9	93.977	333.93.97	01/01/20	06/30/20	01/01/20	12/31/20	\$34,560	\$34,560	
FFY19 STD Prevention (PCHD)-FPH	NH25PS005146	Amd 9	93.977	333.93.97	07/01/19	12/31/19	01/01/19	12/31/19	\$37,945	\$37,945	
FFY19 STD Prevention (PCHD)-FPH	NH25PS005146	Amd 7	93.977	333.93.97	01/01/19	06/30/19	01/01/19	12/31/19	\$37,945		

Snohomish Health District

EXHIBIT B-24
ALLOCATIONS
Contract Term: 2018-2021

Contract Number: CLH18261
Date: September 15, 2021

Indirect Rate as of January 2018: 36.29% Prevention Svcs; 37.31% Environmental Hlth; 34.25% Admin Direct & PHEPR
Indirect Rate as of January 2019: 53.63% Prevention Svcs; 38.60% Environmental Hlth; 30.37% Admin Direct & PHEPR
Indirect Rate as of January 2020: 45.70%
Indirect Rate as of January 2021: 47.10%

Chart of Accounts Program Title	Federal Award Identification #	Amend #	CFDA *	BARS Revenue Code**	Statement of Work		DOH Use Only		Amount	Funding Period Sub Total	Chart of Accounts Total
					Funding Period Start Date	Funding Period End Date	Chart of Accounts Funding Period Start Date	Chart of Accounts Funding Period End Date			
FFY21 STD Prev Supplemental [PCHD]	NH25PS005146	Amd 24	93.977	333.93.97	07/01/21	12/31/21	01/01/21	12/31/21	\$163,367	\$163,367	\$163,367
FFY22 MCHBG LHJ Contracts	B0445251	Amd 23	93.994	333.93.99	10/01/21	12/31/21	10/01/21	09/30/22	\$111,220	\$111,220	\$1,809,517
FFY21 MCHBG LHJ Contracts	B0440169	Amd 23	93.994	333.93.99	10/01/20	09/30/21	10/01/20	09/30/21	\$30,000	\$474,879	
FFY21 MCHBG LHJ Contracts	B0440169	Amd 18	93.994	333.93.99	10/01/20	09/30/21	10/01/20	09/30/21	\$444,879		
FFY20 MCHBG LHJ Contracts	B04MC32578	Amd 10	93.994	333.93.99	10/01/19	09/30/20	10/01/19	09/30/20	\$444,879	\$444,879	
FFY19 MCHBG LHJ Contracts	B04MC32578	Amd 4	93.994	333.93.99	10/01/18	09/30/19	10/01/18	09/30/19	\$444,879	\$444,879	
FFY18 MCHBG LHJ Contracts	B04MC31524	N/A	93.994	333.93.99	01/01/18	09/30/18	10/01/17	09/30/18	\$333,660	\$333,660	
FEMA-75 COVID LHJ Allocation		Amd 19	97.036	333.97.03	07/01/20	12/30/20	07/01/20	12/30/20	(\$3,323,103)	\$0	\$0
FEMA-75 COVID LHJ Allocation		Amd 17	97.036	333.97.03	07/01/20	12/30/20	07/01/20	12/30/20	\$3,323,103		
Healthy Communities		Amd 12	N/A	334.04.91	07/01/19	06/30/20	07/01/19	06/30/21	(\$8,905)	\$0	\$0
Healthy Communities		Amd 10	N/A	334.04.91	07/01/19	06/30/20	07/01/19	06/30/21	\$8,905		
State Disease Control & Prev-FPH		Amd 22	N/A	334.04.91	07/01/21	12/31/21	07/01/21	12/31/21	\$60,032	\$60,032	\$267,914
State Disease Control & Prev-FPH		Amd 18	N/A	334.04.91	07/01/20	06/30/21	07/01/19	06/30/21	\$59,342	\$119,374	
State Disease Control & Prev-FPH		Amd 16, 18	N/A	334.04.91	07/01/20	06/30/21	07/01/19	06/30/21	\$60,032		
State Disease Control & Prev-FPH		Amd 12	N/A	334.04.91	07/01/19	06/30/20	07/01/19	06/30/21	\$44,669	\$75,395	
State Disease Control & Prev-FPH		Amd 9	N/A	334.04.91	07/01/19	06/30/20	07/01/19	06/30/21	\$30,726		
State Disease Control & Prev-FPH		Amd 2, 5	N/A	334.04.91	07/01/18	06/30/19	07/01/17	06/30/19	\$13,113	\$13,113	
State HIV Prevention		Amd 6	N/A	334.04.91	01/01/19	06/30/19	07/01/17	06/30/19	\$13,113	\$13,113	\$26,226
State HIV Prevention		Amd 2	N/A	334.04.91	01/01/18	06/30/18	07/01/17	06/30/19	\$13,113		
Zoonotics-GFS		Amd 9	N/A	334.04.91	07/01/19	06/30/20	07/01/19	06/30/21	\$6,044	\$6,044	\$7,500
Zoonotics-GFS		Amd 9	N/A	334.04.91	06/01/19	06/30/19	07/01/17	06/30/19	\$1,456	\$1,456	
FY20/21 COVID-19 Disaster Response Acct		Amd 14, 19	N/A	334.04.92	01/20/20	06/30/21	01/01/20	06/30/21	\$1,500,000	\$1,500,000	\$1,500,000
FFY21 COVID GFS LHJ Regional		Amd 20	N/A	334.04.92	12/31/20	06/30/21	12/31/20	06/30/21	(\$3,750,000)	\$0	\$0
FFY21 COVID GFS LHJ Regional		Amd 19	N/A	334.04.92	12/31/20	06/30/21	12/31/20	06/30/21	\$3,750,000		
FPH Lead Case Mgmt		Amd 15	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/20	\$3,925	\$12,830	\$12,830
FPH Lead Case Mgmt		Amd 12, 15	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/20	\$8,905		
SFY2 Lead Environments of Children		Amd 4	N/A	334.04.93	07/01/18	06/30/19	07/01/18	06/30/19	\$10,000	\$10,000	\$25,000
SFY1 Lead Environments of Children		Amd 1	N/A	334.04.93	01/01/18	06/30/18	07/01/17	06/30/18	\$15,000	\$15,000	

EXHIBIT B-24
ALLOCATIONS
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Chart of Accounts Program Title	Federal Award Identification #	Amend #	CFDA *	BARS Revenue Code**	Statement of Work		DOH Use Only		Amount	Funding Period Sub Total	Chart of Accounts Total
					Funding Period Start Date	Funding Period End Date	Chart of Accounts Funding Period Start Date	Chart of Accounts Funding Period End Date			
SFY22 Marijuana Education		Amd 24	N/A	334.04.93	09/01/21	12/31/21	07/01/21	06/30/22	\$14,658	\$14,658	\$50,759
SFY21 Marijuana Education		Amd 16	N/A	334.04.93	07/01/20	12/31/20	07/01/20	06/30/21	\$18,599	\$18,599	
SFY20 Marijuana Education		Amd 11	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/20	(\$574)	\$17,502	
SFY20 Marijuana Education		Amd 10	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/20	\$18,076		
SFY19 Marijuana Tobacco Edu		Amd 2	N/A	334.04.93	07/01/18	06/30/19	07/01/18	06/30/19	\$14,658	\$14,658	\$14,658
Rec Shellfish/Biotoxin		Amd 22	N/A	334.04.93	07/01/21	12/31/21	07/01/21	12/31/21	\$4,000	\$4,000	\$28,000
Rec Shellfish/Biotoxin		Amd 19	N/A	334.04.93	07/01/19	06/30/21	07/01/19	06/30/21	\$4,000	\$14,000	
Rec Shellfish/Biotoxin		Amd 16, 19	N/A	334.04.93	07/01/19	06/30/21	07/01/19	06/30/21	\$5,000		
Rec Shellfish/Biotoxin		Amd 9, 16, 19	N/A	334.04.93	07/01/19	06/30/21	07/01/19	06/30/21	\$5,000		
Rec Shellfish/Biotoxin		Amd 6	N/A	334.04.93	01/01/18	06/30/19	07/01/17	06/30/19	\$3,000	\$10,000	
Rec Shellfish/Biotoxin		N/A	N/A	334.04.93	01/01/18	06/30/19	07/01/17	06/30/19	\$7,000		
Small Onsite Management (ALEA)		Amd 23	N/A	334.04.93	07/01/21	12/31/21	07/01/21	06/30/23	\$15,000	\$15,000	\$165,000
Small Onsite Management (ALEA)		Amd 19	N/A	334.04.93	01/01/21	06/30/21	07/01/19	06/30/21	\$30,000	\$30,000	
Small Onsite Management (ALEA)		Amd 9, 19	N/A	334.04.93	07/01/20	06/30/21	07/01/19	06/30/21	\$30,000	\$30,000	
Small Onsite Management (ALEA)		Amd 9	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/21	\$30,000	\$30,000	
Small Onsite Management (ALEA)		Amd 5	N/A	334.04.93	07/01/18	06/30/19	07/01/17	06/30/19	\$13,459	\$13,459	
Small Onsite Management (ALEA)		Amd 5	N/A	334.04.93	01/01/18	06/30/18	07/01/17	06/30/19	(\$13,459)	\$46,541	
Small Onsite Management (ALEA)		N/A, Amd 5	N/A	334.04.93	01/01/18	06/30/18	07/01/17	06/30/19	\$60,000		
FPH-Youth Tobacco Vapor Prevention		Amd 16	N/A	334.04.93	07/01/20	12/31/20	07/01/19	06/30/21	\$81,575	\$81,575	\$164,308
FPH-Youth Tobacco Vapor Prevention		Amd 11	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/21	\$82,733	\$82,733	
Youth Tobacco Vapor Products		Amd 22	N/A	334.04.93	07/01/21	12/31/21	07/01/21	12/31/21	\$56,259	\$56,259	\$302,974
Youth Tobacco Vapor Products		Amd 16	N/A	334.04.93	07/01/20	12/31/20	07/01/19	06/30/21	\$56,259	\$56,259	
Youth Tobacco Vapor Products		Amd 11	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/21	(\$33,891)	\$51,526	
Youth Tobacco Vapor Products		Amd 9	N/A	334.04.93	07/01/19	06/30/20	07/01/19	06/30/21	\$85,417		
Youth Tobacco Vapor Products		Amd 7	N/A	334.04.93	01/01/18	06/30/19	07/01/17	06/30/19	(\$451)	\$138,930	
Youth Tobacco Vapor Products		Amd 6	N/A	334.04.93	01/01/18	06/30/19	07/01/17	06/30/19	\$36,000		
Youth Tobacco Vapor Products		Amd 5, 6	N/A	334.04.93	01/01/18	06/30/19	07/01/17	06/30/19	\$21,184		
Youth Tobacco Vapor Products		Amd 2, 6	N/A	334.04.93	01/01/18	06/30/19	07/01/17	06/30/19	\$49,916		
Youth Tobacco Vapor Products		N/A, Amd 6	N/A	334.04.93	01/01/18	06/30/19	07/01/17	06/30/19	\$32,281		
ADAP Rebate (Local) 19-21		Amd 24	N/A	334.04.98	07/01/21	12/31/21	07/01/21	12/31/21	(\$15,716)	\$0	\$62,864
ADAP Rebate (Local) 19-21		Amd 22	N/A	334.04.98	07/01/21	12/31/21	07/01/21	12/31/21	\$15,716		

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ALLOCATIONS
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Chart of Accounts Program Title	Federal Award Identification #	Amend #	CFDA *	BARS Revenue Code**	Statement of Work		DOH Use Only		Amount	Funding Period Sub Total	Chart of Accounts Total
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ADAP Rebate (Local) 19-21		Amd 18	N/A	334.04.98	07/01/20	06/30/21	07/01/19	06/30/21	\$15,716	\$31,432	
ADAP Rebate (Local) 19-21		Amd 16, 18	N/A	334.04.98	07/01/20	06/30/21	07/01/19	06/30/21	\$15,716		
ADAP Rebate (Local) 19-21		Amd 9	N/A	334.04.98	07/01/19	06/30/20	07/01/19	06/30/21	\$31,432	\$31,432	
FFY17 ADAP Rebate (Local) 17-19		Amd 6	N/A	334.04.98	01/01/19	06/30/19	07/01/17	06/30/19	\$15,717	\$15,717	\$47,150
FFY17 ADAP Rebate (Local) 17-19		Amd 2	N/A	334.04.98	07/01/18	12/31/18	07/01/17	06/30/19	\$15,716	\$15,716	
FFY17 ADAP Rebate (Local) 17-19		Amd 2	N/A	334.04.98	01/01/18	06/30/18	07/01/17	06/30/19	\$15,717	\$15,717	
SFY20 Bezos Vroom		Amd 20	N/A	334.04.98	02/01/21	12/31/21	01/01/20	12/31/21	\$50,000	\$50,000	\$50,000
RW FFY21 Grant Year Local (Rebate)		Amd 24	N/A	334.04.98	07/01/21	12/31/21	04/01/21	03/31/22	\$15,716	\$15,716	\$15,716
FPHS-LHJ-Proviso (YRI)		Amd 24	N/A	336.04.25	07/01/21	12/31/21	07/01/21	06/30/23	\$2,549,404	\$3,150,000	\$4,788,696
FPHS-LHJ-Proviso (YRI)		Amd 23	N/A	336.04.25	07/01/21	12/31/21	07/01/21	06/30/23	\$600,596		
FPHS Funding for LHJs Dir		Amd 17, 19	N/A	336.04.25	07/01/20	06/30/21	07/01/19	06/30/21	\$163,092	\$600,596	
FPHS Funding for LHJs		Amd 10, 19	N/A	336.04.25	07/01/20	06/30/21	07/01/19	06/30/21	\$437,504		
FPHS Funding for LHJs Dir		Amd 17	N/A	336.04.25	07/01/19	06/30/20	07/01/19	06/30/21	\$163,092	\$600,596	
FPHS Funding for LHJs		Amd 10	N/A	336.04.25	07/01/19	06/30/20	07/01/19	06/30/21	\$437,504		
FPHS Funding for LHJs Dir		Amd 3	N/A	336.04.25	07/01/18	06/30/19	07/01/17	06/30/19	\$437,504	\$437,504	
YR 20 SRF - Local Asst (15%) (FS) SS		Amd 3	N/A	346.26.64	01/01/18	12/31/18	07/01/15	06/30/19	(\$8,400)	\$0	\$0
YR 20 SRF - Local Asst (15%)(FS) SS		N/A, Amd 3	N/A	346.26.64	01/01/18	12/31/18	07/01/15	06/30/19	\$8,400		
YR 20 SRF - Prog Mgmt (10%) (FS) SS		Amd 3	N/A	346.26.64	01/01/18	12/31/18	07/01/17	06/30/19	\$2,000	\$2,000	\$2,000
YR 21 SRF - Prog Mgmt (10%) (FO-NW)		Amd 11	N/A	346.26.64	06/01/18	12/31/18	07/01/17	06/30/19	\$10,073	\$10,073	\$10,073
YR 21 SRF - Local Asst (15%) (FS) SS		Amd 12	N/A	346.26.64	01/01/18	06/30/19	07/01/17	06/30/19	(\$1,600)		
YR 21 SRF - Local Asst (15%) (FS) SS		Amd 10	N/A	346.26.64	01/01/18	06/30/19	07/01/17	06/30/19	(\$400)	\$9,200	\$9,200
YR 21 SRF - Local Asst (15%) (FS) SS		Amd 6, 10	N/A	346.26.64	01/01/18	06/30/19	07/01/17	06/30/19	\$5,200		
YR 21 SRF - Local Asst (15%) (FS) SS		Amd 3, 6, 10	N/A	346.26.64	01/01/18	06/30/19	07/01/17	06/30/19	\$6,000		
YR 22 SRF - Local Asst (15%) (FO-NW) SS		Amd 15	N/A	346.26.64	01/01/19	12/31/20	01/01/19	06/30/21	\$1,200	\$8,000	\$8,000
YR 22 SRF - Local Asst (15%) (FO-NW) SS		Amd 12	N/A	346.26.64	01/01/19	12/31/20	01/01/19	06/30/21	\$6,400		
YR 22 SRF - Local Asst (15%) (FO-NW) SS		Amd 10, 12	N/A	346.26.64	01/01/19	12/31/20	01/01/19	06/30/21	\$400		
YR 23 SRF - Local Asst (15%) (FO-NW) SS		Amd 20	N/A	346.26.64	01/01/21	12/31/21	09/01/20	12/31/21	\$14,400	\$14,400	\$14,400

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ALLOCATIONS
Contract Term: 2018-2021**

Contract Number: CLH18261
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Chart of Accounts Program Title	Federal Award Identification #	Amend #	CFDA *	BARS Revenue Code**	Statement of Work		DOH Use Only		Amount	Funding Period Sub Total	Chart of Accounts Total
					Funding Period Start Date	Funding Period End Date	Chart of Accounts Funding Period Start Date	Chart of Accounts Funding Period End Date			
Sanitary Survey Fees (FO-NW) SS State		Amd 15	N/A	346.26.65	01/01/18	12/31/20	07/01/17	06/30/21	\$4,000	\$11,927	\$11,927
Sanitary Survey Fees (FO-NW) SS State		Amd 12	N/A	346.26.65	01/01/18	12/31/20	07/01/17	06/30/21	\$4,800		\$4,800
Sanitary Survey Fees (FO-NW) SS State		Amd 11, 12	N/A	346.26.65	01/01/18	12/31/20	07/01/17	06/30/21	(\$10,073)		
Sanitary Survey Fees (FO-NW) SS State		Amd 6, 12	N/A	346.26.65	01/01/18	12/31/20	07/01/17	06/30/21	\$5,200		\$5,200
Sanitary Survey Fees (FO-NW) - SS State		Amd 3, 6, 12	N/A	346.26.65	01/01/18	12/31/20	07/01/15	06/30/21	(\$400)		
Sanitary Survey Fees (FO-NW) - SS State		N/A, Amd 3, 6, 12	N/A	346.26.65	01/01/18	12/31/20	07/01/17	06/30/21	\$8,400		\$8,400
Yr 20 SRF - Local Asst (15%) (FS) TA		Amd 3	N/A	346.26.66	01/01/18	12/31/18	07/01/17	06/30/19	(\$2,000)	\$0	\$0
Yr 20 SRF - Local Asst (15%) (FS) TA		N/A, Amd 3	N/A	346.26.66	01/01/18	12/31/18	07/01/17	06/30/19	\$2,000		\$2,000
YR 21 SRF - Local Asst (15%) (FS) TA		Amd 10	N/A	346.26.66	01/01/18	06/30/19	07/01/17	06/30/19	(\$3,750)	\$250	\$250
YR 21 SRF - Local Asst (15%) (FS) TA		Amd 4, 6, 10	N/A	346.26.66	01/01/18	06/30/19	07/01/17	06/30/19	\$2,000		\$2,000
YR 21 SRF - Local Asst (15%) (FS) TA		Amd 3, 6, 10	N/A	346.26.66	01/01/18	06/30/19	07/01/17	06/30/19	\$2,000		\$2,000
YR 22 SRF - Local Asst (15%) (FO-NW) TA		Amd 15	N/A	346.26.66	01/01/19	12/31/20	01/01/19	06/30/21	(\$3,500)	\$4,250	\$4,250
YR 22 SRF - Local Asst (15%) (FO-NW) TA		Amd 12	N/A	346.26.66	01/01/19	12/31/20	01/01/19	06/30/21	\$4,000		\$4,000
YR 22 SRF - Local Asst (15%) (FO-NW) TA		Amd 10, 12	N/A	346.26.66	01/01/19	12/31/20	01/01/19	06/30/21	\$3,750		\$3,750
YR 23 SRF - Local Asst (15%) (FO-NW) TA		Amd 20	N/A	346.26.66	01/01/21	12/31/21	09/01/20	12/31/21	\$4,000	\$4,000	\$4,000
TOTAL									\$40,564,904	\$40,564,904	
Total consideration:				\$37,648,804						GRAND TOTAL	\$40,564,904
GRAND TOTAL				\$2,916,100						Total Fed	\$32,971,209
				\$40,564,904						Total State	\$7,593,695

*Catalog of Federal Domestic Assistance

**Federal revenue codes begin with "333" . State revenue codes begin with "334" .

Exhibit C-24 Schedule of Federal Awards

AMENDMENT #24

Date: September 15, 2021

SNOHOMISH HEALTH DISTRICT-SWV0000598-00

CONTRACT CLH18261 - Snohomish Health District

CONTRACT PERIOD: 01/01/2018-12/31/2021

Chart of Accounts	Program Title	BARS	DOH Federal Award Date	Total Amt Federal Award	Allocation Period Start Date	End Date	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Award Identification Number	Federal Grant Award Name
FFY20 USDA WIC CLIENT SVS CONTRACTS		333.10.55	10/01/19	\$6,161,312	10/01/19	09/30/20	\$1,328,425	10.557	Special Supplemental Nutrition Program for Women, Infants, and Children	Department of Agriculture Food and Nutrition Service	207WAWA7W1003	WOMEN, INFANTS AND CHILDREN
FFY20 USDA BFPC PROG MGMT		333.10.55	02/18/20	\$1,861,572	10/01/19	09/30/20	\$6,062	10.557	Special Supplemental Nutrition Program for Women, Infants, and Children	Department of Agriculture Food and Nutrition Service	207WAWA1W5003	WIC BREASTFEEDING PEER COUNSELING
FFY19 CSS USDA WIC PROGRAM MGMT		333.10.55	10/01/17	\$40,101,357	10/01/18	09/30/19	\$808,205	10.557	Special Supplemental Nutrition Program for Women, Infants, and Children	Department of Agriculture Food and Nutrition Service	187WAWA7W1003	WOMEN, INFANTS AND CHILDREN
FFY19 CSS USDA BF PEER COUNSELING		333.10.55	03/28/19	\$1,286,951	10/01/18	09/30/20	\$8,083	10.557	Special Supplemental Nutrition Program for Women, Infants, and Children	Department of Agriculture Food and Nutrition Service	197WAWA1W5003	WIC BREASTFEEDING PEER COUNSELING
FFY18 CSS USDA WIC PROGRAM MGMT		333.10.55	10/02/17	\$27,576,710	01/01/18	09/30/18	\$751,645	10.557	Special Supplemental Nutrition Program for Women, Infants, and Children	Department of Agriculture Food and Nutrition Service	187WAWA7W1003	USDA-WIC ADMIN
FFY18 CSS USDA BF PEER COUNSELING		333.10.55	10/01/17	\$1,318,273	01/01/18	09/30/19	\$8,083	10.557	Special Supplemental Nutrition Program for Women, Infants, and Children	Department of Agriculture Food and Nutrition Service	187WAWA1W5003	WOMEN, INFANTS AND CHILDREN
FFY19 CSS USDA FMNP PROG MGMT		333.10.57	10/01/18	\$130,973	01/01/19	09/30/19	\$920	10.572	WIC Farmers' Market Nutrition Program (FMNP)	Department of Agriculture-Food and Nutrition Service	197WAWA7Y8604	COMMODITY ASSISTANCE PROGRAM
FFY18 CSS USDA FMNP PROG MGMT		333.10.57	10/01/17	\$86,117	01/01/18	09/30/18	\$941	10.572	WIC Farmers' Market Nutrition Program (FMNP)	Department of Agriculture Food and Nutrition Service	187WAWA7Y8604	COMMODITY ASSISTANCE PROGRAM
FFY19 MIS TECH GRANT		333.10.57	01/28/19	\$2,209,026	10/01/19	09/30/20	\$230	10.578	WIC Grants to States (WGS)	Department of Agriculture Food and Nutrition Service	197WAWA1G5212	WIC CONTINGECY
FFY16 CASCADES USDA WIC PROG MGMT-MIS		333.10.57	03/11/16	\$2,224,476	10/01/18	09/30/19	\$1,265	10.578	WIC Grants to States (WGS)	Department of Agriculture Food and Nutrition Service	16157WAWA6W522	WOMEN, INFANTS AND CHILDREN WIC SAM PROJECTS
SS COMMUNITY OUTREACH PN		333.21.01	NGA Not Received	NGA Not Received	07/01/20	06/30/21	\$120,000	21.019	Coronavirus Relief Fund	Department of Treasury	NGA Not Received	NGA Not Received
BITV-COVID ED LHJ ALLOCATION-CARES		333.21.01	NGA Not Received	NGA Not Received	07/01/20	06/30/21	\$1,649,220	21.019	Coronavirus Relief Fund	Department of the Treasury	NGA Not Received	NGA Not Received
FFY21 PHEP BP3 LHJ FUNDING		333.93.06	05/27/21	\$11,574,298	07/01/21	12/31/21	\$321,191	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP922043	PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) COOPERATIVE AGREEMENT
FFY21 CDC CTIES READINESS BP3		333.93.06	05/27/21	\$1,326,605	07/01/21	12/31/21	\$79,242	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP922043	PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) COOPERATIVE AGREEMENT

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Chart of Accounts	Program Title	BARS	DOH Federal Award Date	Total Amt Federal Award	Allocation Period Start Date	End Date	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Award Identification Number	Federal Grant Award Name
FFY20 PHEP CITIES READINESS BP2		333.93.06	06/12/20	\$11,365,797	07/01/20	06/30/21	\$132,070	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP922043	PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) COOPERATIVE AGREEMENT
FFY20 PHEP BP2 LHJ FUNDING		333.93.06	06/12/20	\$11,365,797	07/01/20	06/30/21	\$535,318	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP922043	PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) COOPERATIVE AGREEMENT
FFY19 PHEP CITIES READINESS BP1		333.93.06	06/29/19	\$1,075,939	07/01/19	06/30/20	\$132,220	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP922043	PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) COOPERATIVE AGREEMENT
FFY19 PHEP BP1 LHJ FUNDING		333.93.06	06/29/19	\$11,307,904	07/01/19	06/30/20	\$535,318	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP922043	PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) COOPERATIVE AGREEMENT
FFY18 EPR PHEP BP1 SUPP LHJ FUNDING		333.93.06	08/01/18	\$11,062,782	07/01/18	06/30/19	\$535,318	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921889-01	HOSPITAL PREPAREDNESS PROGRAM AND PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT
FFY18 EPR PHEP BP1 SUPP CITIES READINESS		333.93.06	08/01/18	\$1,052,317	07/01/18	06/30/19	\$130,010	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921889-01	HOSPITAL PREPAREDNESS PROGRAM AND PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT
FFY17 EPR PHEP BP1 LHJ FUNDING		333.93.06	07/18/17	\$11,062,782	01/01/18	06/30/18	\$216,083	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921889-01	HPP AND PHEP COOPERATIVE AGREEMENT
FFY17 EPR PHEP BP1 CITIES READINESS INIT		333.93.06	07/18/17	\$1,052,317	01/01/18	06/30/18	\$113,717	93.069	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921889-01	HPP AND PHEP COOPERATIVE AGREEMENT
FFY21 TB ELIMINATION-FPH		333.93.11	12/17/20	\$1,803,654	01/01/21	12/31/21	\$95,267	93.116	Project Grants and Cooperative Agreements for Tuberculosis Control Program	Department of Health and Human Services Centers for Disease Control and Prevention	NU52PS910221	WASHINGTON STATE TB ELIMINATION AND LABORATORY COOPERATIVE AGREEMENT
FFY20 TB ELIMINATION-FPH		333.93.11	12/11/19	\$324,938	01/01/20	12/31/20	\$103,101	93.116	Project Grants and Cooperative Agreements for Tuberculosis Control Program	Department of Health and Human Services Centers for Disease Control and Prevention	NU52PS910221-01-00	WASHINGTON STATE TB ELIMINATION AND LABORATORY COOPERATIVE AGREEMENT
FFY19 TB ELIMINATION-FPH		333.93.11	12/10/18	\$1,566,912	01/01/19	12/31/19	\$98,489	93.116	Project Grants and Cooperative Agreements for Tuberculosis Control Program	Department of Health and Human Services Centers for Disease Control and Prevention	5NU52PS004674-05-00	WASHINGTON STATE TB ELIMINATION AND LABORATORY COOPERATIVE
FFY18 TB ELIMINATION-FPH		333.93.11	04/23/18	\$5,172,767	01/01/18	11/30/18	\$94,907	93.116	Project Grants and Cooperative Agreements for Tuberculosis Control Program	Department of Health and Human Services Centers for Disease Control and Prevention	5NU52PS004674-04-00	WASHINGTON STATE TB ELIMINATION AND LABORATORY COOPERATIVE
FFY21 OVERDOSE DATA TO ACTION PREV		333.93.13	07/29/21	\$4,390,240	09/01/21	12/31/21	\$150,000	93.136	Injury Prevention and Control Research and State and Community-Based Programs	Department of Health and Human Services Centers for Disease Control and Prevention	NU17CE925007	WASHINGTON STATE DEPARTMENT OF HEALTH OVERDOSE DATA TO ACTION
FFY20 OVERDOSE DATA TO ACTION PREV		333.93.13	11/06/20	\$4,390,240	09/01/20	08/31/21	\$161,688	93.136	Injury Prevention and Control Research and State and Community-Based Programs	Department of Health and Human Services Centers for Disease Control and Prevention	NU17CE925007	WASHINGTON STATE DEPARTMENT OF HEALTH OVERDOSE DATA TO ACTION

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FFY19	OVERDOSE DATA TO ACTION PREV	333.93.13	08/12/19	\$4,390,240	09/01/19	08/31/20	\$150,000	93.136	Injury Prevention and Control Research and State and Community-Based Programs	Department of Health and Human Services Centers for Disease Control and Prevention	NU17CE025007	WASHINGTON STATE DEPARTMENT OF HEALTH OVERDOSE DATA TO ACTION
FFY18	PRESCRIPTION DRUG OD-SUPP	333.93.13	05/31/17	\$6,223,623	09/01/18	08/31/19	\$141,530	93.136	Injury Prevention and Control Research and State and Community Based Programs	Department of Health and Human Services Centers for Disease Control and Prevention	NU17CE002734	PRESCRIPTION DRUG OVERDOSE FOR STATES
FFY17	PRESCRIPTION DRUG OD-SUPP	333.93.13	03/16/16	\$4,031,632	01/01/18	08/31/18	\$183,166	93.136	Injury Prevention and Control Research and State and Community Based Programs	Department of Health and Human Services Centers for Disease Control and Prevention	U17CE002734	PRESCRIPTION DRUG OVERDOSE FOR STATES
FFY22	VFC OPS	333.93.26	07/01/21	\$1,961,462	07/01/21	12/31/21	\$45,150	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY22	VFC IQIP	333.93.26	07/01/21	\$1,961,462	07/01/21	12/31/21	\$74,468	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY22	PPHF OPS	333.93.26	07/01/21	\$1,961,462	07/01/21	12/31/21	\$64,340	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY21	VFC OPS	333.93.26	07/01/20	\$9,082,252	07/01/20	06/30/21	\$45,150	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY21	VFC IQIP	333.93.26	07/01/20	\$9,082,252	07/01/20	06/30/21	\$74,468	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY21	PPHF OPS	333.93.26	07/01/20	\$9,082,252	07/01/20	06/30/21	\$21,500	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY21	IMPROVING VACCINATIONS AA1	333.93.26	07/01/20	\$9,082,252	07/01/20	06/30/21	\$42,840	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY21	ENHANCED INFLUENZA COVERAGE CARES	333.93.26	08/13/20	\$12,548,955	07/01/20	06/30/21	\$45,150	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY21	COVID19 VACCINE SERVICES-CARES	333.93.26	01/15/21	\$68,807,053	07/01/20	12/31/21	\$117,570	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY20	VPD OUTBREAK RESPONSE BB1	333.93.26	07/01/19	\$9,234,835	09/01/19	06/30/20	\$14,000	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY20	VFC OPS	333.93.26	07/01/19	\$9,234,835	07/01/19	06/30/20	\$45,150	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM

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Chart of Accounts	Program Title	BARS	DOH Federal Award Date	Total Amt Federal Award	Allocation Period Start Date	End Date	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Award Identification Number	Federal Grant Award Name
FFY20 VFC IQIP		333.93.26	07/01/19	\$9,234,835	07/01/19	06/30/20	\$70,180	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY20 PPHF OPS		333.93.26	07/01/19	\$9,234,835	07/01/19	06/30/20	\$21,500	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY20 IMPROVING VACCINATIONS AA1		333.93.26	07/01/19	\$9,234,835	11/01/19	06/30/20	\$33,350	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN PROGRAM
FFY17 VFC OPS		333.93.26	03/03/17	\$1,201,605	01/01/18	06/30/19	\$88,947	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	5NH23IP000762-05-00	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY17 PPHF OPS		333.93.26	06/29/18	\$3,634,512	07/01/18	06/30/19	\$21,500	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP000762	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY17 INCREASING IMMUNIZATION RATES		333.93.26	06/29/18	\$1,722,443	07/01/18	06/30/19	\$45,150	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP000762	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY17 AFIX		333.93.26	03/03/17	\$1,672,289	01/01/18	06/30/18	\$30,009	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	5NH23IP000762-05-00	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
FFY17 317 OPS		333.93.26	03/03/17	\$575,969	01/01/18	06/30/18	\$20,148	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	5NH23IP000762-05-00	IMMUNIZATION GRANT AND VACCINES FOR CHILDREN'S PROGRAM
COVID19 VACCINES		333.93.26	03/31/21	\$80,234,086	07/01/20	12/31/21	\$2,865,603	93.268	Immunization Cooperative Agreements	Department of Health and Human Services Centers for Disease Control and Prevention	NH23IP922619	CDC-RFA-IP19-1901 IMMUNIZATION AND VACCINES FOR CHILDREN
FFY21 VIRAL HEPATITIS SURVEILLANCE-FPH		333.93.27	06/28/21	\$638,761	05/01/21	12/31/21	\$5,445	93.270	Viral Hepatitis Prevention and Control	Department of Health and Human Services Centers for Disease Control and Prevention	NU51PS005171	ADULT VIRAL HEPATITIS PREVENTION AND CONTROL
FFY20 VIRAL HEPATITIS SURVEILLANCE-FPH		333.93.27	07/02/20	\$757,429	07/01/20	04/30/21	\$32,658	93.270	Viral Hepatitis Prevention and Control	Department of Health and Human Services Centers for Disease Control and Prevention	NU51PS005102	WASHINGTON STATE DEPARTMENT OF HEALTH-VIRAL HEPATITIS PREVENTION AND SURVEILLANCE
FFY19 VIRAL HEPATITIS SURVEILLANCE-FPH		333.93.27	04/10/19	\$1,066,799	07/01/19	04/30/20	\$32,658	93.270	Adult Viral Hepatitis Prevention and Control	Department of Health and Human Services Centers for Disease Control and Prevention	NU51PS005133	IMPROVING HEPATITIS B AND C SURVEILLANCE AND LINKAGE TO CARE IN WASHINGTON STATE
FFY18 VIRAL HEPATITIS SURVEILLANCE-FPH		333.93.27	04/27/18	\$668,672	05/01/18	12/31/18	\$32,667	93.270	Adult Viral Hepatitis Prevention and Control	Department of Health and Human Services Centers for Disease Control and Prevention	5NU52PS005133-02-00	IMPROVING HEPATITIS B AND C SURVEILLANCE AND LINKAGE TO CARE IN WASHINGTON STATE
FFY17 VIRAL HEPATITIS SURVEILLANCE-FPH		333.93.27	04/19/18	\$312,439	01/01/18	04/30/18	\$32,667	93.270	Adult Viral Hepatitis Prevention and Control	Department of Health and Human Services Centers for Disease Control and Prevention	6NU51PS005102-02-03	WASHINGTON STATE DEPARTMENT OF HEALTH-VIRAL HEPATITIS PREVENTION AND SURVEILLANCE

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FFY19	TOBACCO PREVENTION	333.93.30	03/04/19	\$5,538,507	03/29/19	04/28/20	\$37,772	93.305	National State Based Tobacco Control Programs	Department of Health and Human Services Centers for Disease Control and Prevention	NU58DP006004	TOBACCO CONTROL PROGRAM
FFY18	TOBACCO PREVENTION	333.93.30	03/22/18	\$1,081,051	03/29/18	03/28/19	\$36,207	93.305	National State Based Tobacco Control Programs	Department of Health and Human Services Centers for Disease Control and Prevention	U58DP006004	TOBACCO CONTROL PROGRAM
FFY20	VECTOR-BORNE T2&3 EPI ELC FPH	333.93.32	03/15/21	\$450,062,518	06/01/21	12/31/21	\$3,000	93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)-Building and Strengthening Epidemiology, Laboratory and	Department of Health and Human Services Centers for Disease Control and Prevention	NU50CK000515	EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)-BUILDING AND STRENGTHENING EPIDEMIOLOGY, LABORATORY, AND
FFY20	ELC EDE LHJ ALLOCATION	333.93.32	01/14/21	\$438,300,928	01/15/21	12/31/21	\$11,911,219	93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)-Building and Strengthening Epidemiology, Laboratory and	Department of Health and Human Services Centers for Disease Control and Prevention	NU50CK000515	EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)-BUILDING AND STRENGTHENING EPIDEMIOLOGY, LABORATORY, AND
FFY19	ELC COVID ED LHJ ALLOCATION	333.93.32	01/01/21	\$177,231,546	01/01/21	12/31/21	\$3,983,137	93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)-Building and Strengthening Epidemiology, Laboratory and	Department of Health and Human Services Centers for Disease Control and Prevention	NU50CK000515	EPIDEMIOLOGY & LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)-BUILDING & STRENGTHENING EPIDEMIOLOGY, LABORATORY &
FFY19	COVID CARES	333.93.32	04/23/20	\$22,581,799	06/01/20	12/31/21	\$746,488	93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)-Building and Strengthening Epidemiology, Laboratory and	Department of Health and Human Services Centers for Disease Control and Prevention	NU50CK000515	EPIDEMIOLOGY & LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)-BUILDING & STRENGTHENING EPIDEMIOLOGY, LABORATORY &
FFY18	PH CRISIS RESP-INFORMATION MGMT	333.93.35	08/29/18	\$3,797,131	09/01/18	03/29/20	\$70,859	93.354	Public Health Emergency Response: Cooperative Agreement for Emergency Response: Public Health Crisis Response	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921990	PUBLIC HEALTH CRISIS RESPONSE
FFY18	PH CRISIS RESP-INCIDENT MGMT	333.93.35	08/29/18	\$3,797,131	09/01/18	03/29/20	\$91,911	93.354	Public Health Emergency Response: Cooperative Agreement for Emergency Response: Public Health Crisis Response	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921990	PUBLIC HEALTH CRISIS RESPONSE
FFY18	PH CRISIS RESP-COUNTERMEASURES	333.93.35	09/30/14	\$3,679,752	09/01/18	03/29/20	\$127,513	93.354	Public Health Emergency Response: Cooperative Agreement for Emergency Response: Public Health Crisis Response	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921990	PUBLIC HEALTH CRISIS RESPONSE
FFY18	PH CRISIS RESP-BIOSURVEILLANCE	333.93.35	08/29/18	\$3,797,131	09/01/18	03/29/20	\$32,592	93.354	Public Health Emergency Response: Cooperative Agreement for Emergency Response: Public Health Crisis Response	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921990	PUBLIC HEALTH CRISIS RESPONSE
FFY21	TOBACCO-VAPE PREV COMP 1	333.93.38	04/21/21	\$1,508,380	04/29/21	12/31/21	\$37,772	93.387	National and State Tobacco Control Program	Department of Health and Human Services Centers for Disease Control and Prevention	NU58DP006808	TOBACCO AND VAPOR PRODUCT PREVENTION AND CONTROL PROGRAM
FFY20	TOBACCO-VAPE PREV COMP 1	333.93.38	06/21/20	\$1,523,776	07/01/20	04/28/21	\$37,772	93.387	National and State Tobacco Control Program	Department of Health and Human Services Centers for Disease Control and Prevention	NU58DP006808	TOBACCO AND VAPOR PRODUCT PREVENTION AND CONTROL PROGRAM
FFY18	PHBG TOBACCO PPHF	333.93.75	08/31/18	\$1,675,032	10/01/18	09/30/19	\$40,000	93.758	Preventive Health and Health Services Block Grant funded solely with Prevention and Public Health Funds (PPHF)	Department of Health and Human Services Health Centers for Disease Control and Prevention	NB01OT009234	PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT 2018
FFY17	PHBG TOBACCO PPHF	333.93.75	03/09/17	\$1,557,831	01/01/18	09/29/18	\$31,458	93.758	Preventive Health and Health Services Block Grant funded solely with Prevention and Public Health Funds (PPHF)	Department of Health and Human Services Health Centers for Disease Control and Prevention	NB01OT00918	PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT

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FFY16	EPR HPP EBOLA PART A PREP & RESPONSE	333.93.81	05/19/15	\$3,485,778	01/01/18	06/30/19	\$64,460	93.817	Hospital Preparedness Program (HPP) Ebola Preparedness and Response Activities	Department of Health & Human Services Office of the Secretary	U3REP150480	EBOLA-HOSPITAL PREPAREDNESS PROGRAM SUPPLEMENTAL
FFY16	ASPR HPP EBOLA PART A	333.93.81	05/19/15	\$3,485,778	07/01/19	05/17/20	\$23,595	93.817	Hospital Preparedness Program (HPP) Ebola Preparedness and Response Activities	Department of Health & Human Services Office of the Secretary	U3REP150480	EBOLA-HOSPITAL PREPAREDNESS PROGRAM SUPPLEMENTAL
FFY18	EPR BP1 SUPP HEALTHCARE SYS PREP	333.93.88	08/01/18	\$4,250,883	07/01/18	06/30/19	\$50,000	93.889	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921889-01	HPP AND PHEP COOPERATIVE AGREEMENT
FFY17	EPR HPP BP1 HEALTHCARE SYS PREP	333.93.88	07/18/17	\$4,279,234	01/01/18	06/30/18	\$232,045	93.889	Public Health Emergency Preparedness	Department of Health and Human Services Centers for Disease Control and Prevention	NU90TP921889-01	HPP AND PHEP COOPERATIVE AGREEMENT
FFY21	HIV PREVENTION-FPH	333.93.94	03/11/21	\$21,227,236	01/01/21	12/31/21	\$110,662	93.940	HIV Prevention Activities-Health Department Based	Department of Health and Human Services Centers for Disease Control and Prevention	NU62PS924528	WASHINGTON STATE DEPT OF HEALTH INTEGRATED HIV SURVEILLANCE & PREVENTION PROGRAMS FOR HEALTH DEPTS
FFY20	HIV PREVENTION-FPH	333.93.94	12/06/19	\$11,940,323	01/01/20	12/31/20	\$110,662	93.940	HIV Prevention Activities-Health Department Based	Department of Health and Human Services Centers for Disease Control and Prevention	NU62PS924528	WASHINGTON STATE DEPT OF HEALTH INTEGRATED HIV SURVEILLANCE & PREVENTION PROGRAMS FOR HEALTH DEPTS
FFY19	HIV PREVENTION-FPH	333.93.94	04/18/19	\$10,613,618	07/01/19	12/31/19	\$100,000	93.940	HIV Prevention Activities-Health Department Based	Department of Health and Human Services Centers for Disease Control and Prevention	NU62PS924528	WASHINGTON STATE DEPT OF HEALTH INTEGRATED HIV SURVEILLANCE & PREVENTION PROGRAMS FOR HEALTH DEPTS
FFY19	HIV PREVENTION	333.93.94	12/11/18	\$10,613,618	01/01/19	06/30/19	\$100,000	93.940	HIV Prevention Activities-Health Department Based	HIV Prevention Activities-Health Department Based	NU62PS924528	WASHINGTON STATE DEPARTMENT OF HEALTH INTEGRATED HIV SURVEILLANCE AND PREVENTION PROGRAMS FOR HEALTH DEPTS
FFY18	HIV PREVENTION	333.93.94	03/30/18	\$2,978,529	01/01/18	12/31/18	\$204,500	93.940	HIV Prevention Activities-Health Department Based	HIV Prevention Activities-Health Department Based	6NU62PS924528-01-03	WASHINGTON STATE DEPARTMENT OF HEALTH INTEGRATED HIV SURVEILLANCE AND PREVENTION PROGRAMS FOR HEALTH DEPTS
FFY21	STD PREVENTION (PCHD)-FPH	333.93.97	07/09/21	\$5,592,319	01/01/21	12/31/21	\$69,810	93.977	Preventive Health Services_Sexually Transmitted Diseases Control Grants	Department of Health and Human Services Centers for Disease Control and Prevention	NH25PS005146	WASHINGTON STATE DEPT OF HEALTH OFFICE OF INFECTIOUS DISEASE APPLICATION FOR STD PCHD
FFY21	STD PREV SUPPLEMENTAL (PCHD)	333.93.97	07/09/21	\$5,592,319	07/01/21	12/31/21	\$163,367	93.977	Preventive Health Services_Sexually Transmitted Diseases Control Grants	Department of Health and Human Services Centers for Disease Control and Prevention	NH25PS005146	WASHINGTON STATE DEPT OF HEALTH OFFICE OF INFECTIOUS DISEASE APPLICATION FOR STD PCHD
FFY20	STD PREVENTION (PCHD)-FPH	333.93.97	12/16/19	\$2,304,262	01/01/20	12/31/20	\$69,120	93.977	Preventive Health Services_Sexually Transmitted Diseases Control Grants	Department of Health and Human Services Centers for Disease Control and Prevention	NH25PS005146	WASHINGTON STATE DEPT OF HEALTH OFFICE OF INFECTIOUS DISEASE APPLICATION FOR STD PCHD
FFY19	STD PREVENTION (PCHD)-FPH	333.93.97	12/17/18	\$1,860,059	01/01/19	12/31/19	\$75,890	93.977	Preventive Health Services_Sexually Transmitted Diseases Control Grants	Department of Health and Human Services Centers for Disease Control and Prevention	NH25PS005146	WASHINGTON STATE DEPARTMENT OF HEALTH OFFICE OF INFECTIOUS DISEASE APPLICATION FOR STD PCHD
FFY18	STD PREVENTION (AAPPs)	333.93.97	12/17/17	\$9,738,975	01/01/18	12/31/18	\$75,899	93.977	Preventive Health Services_Sexually Transmitted Diseases Control Grants	Department of Health and Human Services Centers for Disease Control and Prevention	6NH25PS004364-05-01	IMPROVING STD PROGRAMS THROUGH ASSESSMENT, ASSURANCE, POLICY DEVELOPMENT & PREVENTION STRATEGIES

Exhibit C-24 Schedule of Federal Awards

AMENDMENT #24

Date: September 15, 2021

SNOHOMISH HEALTH DISTRICT-SWV0000598-00
CONTRACT CLH18261 - Snohomish Health District
CONTRACT PERIOD: 01/01/2018-12/31/2021

Chart of Accounts	Program Title	BARS	DOH Federal Award Date	Total Amt Federal Award	Allocation Period Start Date End Date	Contract Amt	CFDA	CFDA Program Title	Federal Agency Name	Federal Award Identification Number	Federal Grant Award Name
FFY22 MCHBG LHJ CONTRACTS		333.93.99	10/13/21	\$1,555,601	10/01/21 12/31/21	\$111,220	93.994	Maternal and Child Health Services Block Grant to the States	Department of Health and Human Services Health Resources and Services Administration	B0445251	MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT
FFY21 MCHBG LHJ CONTRACTS		333.93.99	02/08/21	\$2,662,201	10/01/20 09/30/21	\$474,879	93.994	Maternal and Child Health Services Block Grant to the States	Department of Health and Human Services Health Resources and Services Administration	B0440169	MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT
FFY20 MCHBG LHJ CONTRACTS		333.93.99	11/14/18	\$2,225,977	10/01/19 09/30/20	\$444,879	93.994	Maternal and Child Health Services Block Grant to the States	Department of Health and Human Services Health Resources and Services Administration	B04MC32578	MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT
FFY19 MCHBG LHJ CONTRACTS		333.93.99	11/14/18	\$2,225,977	10/01/18 09/30/19	\$444,879	93.994	Maternal and Child Health Services Block Grant to the States	Department of Health and Human Services Health Resources and Services Administration	B04MC32578	MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT
FFY18 MCHBG LHJ CONTRACTS		333.93.99	10/20/17	\$1,650,528	01/01/18 09/30/18	\$333,660	93.994	Maternal and Child Health Services Block Grant to the States	Department of Health and Human Services Health Resources and Services Administration	B04MC31524	MATERNAL AND CHILD HEALTH SERVICES
TOTAL						\$32,971,209					