

STANDARD AGREEMENT - AMENDMENT

STD 213A (Rev. 4/2020)

 CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED 1 PAGES

AGREEMENT NUMBER

19-10185

AMENDMENT NUMBER

A02

Purchasing Authority Number

1. This Agreement is entered into between the Contracting Agency and the Contractor named below:

CONTRACTING AGENCY NAME

California Department of Public Health

CONTRACTOR NAME

County of San Mateo

2. The term of this Agreement is:

START DATE

October 1, 2019

THROUGH END DATE

September 30, 2022

3. The maximum amount of this Agreement after this Amendment is:

\$8,774,049.00 Eight Million Seven Hundred Seventy-Four Thousand Forty-Nine Dollars

4. The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

I. This amendment is removing \$301,640.00 designated for the Regional Breastfeeding Liaison Program and is adding \$130,303.00 for the H.R. 6201 - Families First Coronavirus Response Act, to better support the Contractor's needs. These changes decrease the contract by \$171,337.00, changing the total amount to read \$8,774,049.00. Funds were shifted in fiscal years 2 and 3 in order to accommodate anticipated expenses.

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.

CONTRACTOR

CONTRACTOR NAME (if other than an individual, state whether a corporation, partnership, etc.)

County of San Mateo

CONTRACTOR BUSINESS ADDRESS

2000 Alameda de las Pulgas, Suite 200

CITY

San Mateo

STATE

CA

ZIP

94403

PRINTED NAME OF PERSON SIGNING

Lizelle Lirio de Luna

TITLE

Director of Family Health Services

CONTRACTOR AUTHORIZED SIGNATURE

DATE SIGNED

STATE OF CALIFORNIA

CONTRACTING AGENCY NAME

California Department of Public Health

CONTRACTING AGENCY ADDRESS

1616 Capitol Avenue, Suite 74.262, MS 1802, PO Box 997377

CITY

Sacramento

STATE

CA

ZIP

95899

PRINTED NAME OF PERSON SIGNING

Joseph Torrez

TITLE

Chief, Contracts Management Unit

CONTRACTING AGENCY AUTHORIZED SIGNATURE

DATE SIGNED

CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL

EXEMPTION (If Applicable)

II. Certain changes made in this amendment are displayed as follows: Text additions are displayed in **bold and underline**. Text deletions are displayed with a strike through the text (i.e., ~~Strike~~).

III. Revised Exhibit B, Budget Detail and Payment Provisions, Provision 1.E. as follows:

E. Amounts Payable

The amounts payable under this agreement shall not exceed: ~~\$8,945,386.00~~ **\$8,774,049.00**.

**Exhibit B, Attachment I
Budget Detail Worksheet
October 1, 2019 - September 30, 2022**

Personnel	WIC Position Title	Exhibit A SOW 7.A.	Exhibit A Attach I	Current Base Annual Salary Minimum	Amended Current Base Annual Salary Minimum	Current Base Annual Salary Maximum	Amended Current Base Annual Salary Maximum	Year 1			Year 2			Year 3			Total	Total Budget Adj.	Amended Total						
								10/1/2019 - 9/30/2020			10/1/2020 - 9/30/2021			10/1/2021 - 9/30/2022											
								Amended FTE	Amended Budgeted Amount	FTE	FTE Adj.	Amended FTE	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	FTE				FTE Adj.	Amended FTE	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	
	Nutrition Education Coordinator	8,10,12,14,22	1,2,3,4,5,7	85,945	88,524	107,473	110,697	1.00	107,473	1.00	1.00	114,379		114,379	1.00	117,811		117,811	339,663	-	339,663				
	Supervising Dietitian	2, 4a-d, 5, 6, 7, 8, 12	1,2,3,4,5,7	85,945	88,524	107,473	110,697	4.50	480,707	2.90	1.60	4.50	279,017	219,119	498,136	2.90	1.60	4.50	287,387	225,692	513,079	1,047,111	444,811	1,491,922	
	WIC Nutrition Assistant	4a-d, 7, 8, 12	1,2,3,4,5,7	52,977	54,558	66,185	68,161	10.00	640,917	12.00	-2.00	10.00	720,280	(119,663)	600,617	11.00	-2.00	9.00	689,909	(120,628)	569,281	2,051,106	(240,291)	1,810,815	
	Dietetic Technician	4a-d, 7, 8, 12	1,2,3,4,5,7	56,950	58,656	71,219	73,361	1.00	68,524	1.09	-0.09	1.00	74,587	(1,226)	73,361	1.09	-0.09	1.00	76,825	(1,263)	75,562	219,936	(2,489)	217,447	
	Breast Feeding Peer Counselor	4a-d, 7, 8, 12	8	52,977	54,558	66,185	68,161	2.00	117,516	2.13	-0.13	2.00	131,565	(8,551)	123,014	2.23	-0.23	2.00	140,272	(13,567)	126,705	389,353	(22,118)	367,235	
	Regional Breastfeeding Liaison	4a-d, 8, 9, 12	9	68,556	69,929	85,696	87,401	2.00	151,840	2.00	-0.75	1.25	159,744	(65,409)	94,335	2.03	-1.53	0.50	167,714	(123,581)	44,133	479,298	(188,990)	290,308	
	WIC Director	d, 4g, 5, 6, 7, 8, 9, 10a, 12, 15, 22	4, 5, 8, 9	151,611		189,571		0.25	-			0.00				0.00					-	-	-		
								0.00	-			0.00				0.00					-	-	-		
								0.00	-			0.00				0.00					-	-	-		
								0.00	-			0.00				0.00					-	-	-		
								0.00	-			0.00				0.00					-	-	-		
	Overtime								3,000			3,000		3,000							3,000	9,000	-	9,000	
	Salaries and Wages								1,569,977			1,482,572	24,270	1,506,842					1,482,918	(33,347)	1,449,571	4,535,467	(9,077)	4,526,390	
	Fringe Benefits																								
									Amended Percent			Amended Percent		Amended Percent					Amended Percent						
									51.9390%			60.0000%		53.0000%					60.0000%			53.0000%			
									815,430			889,543		(90,917)					889,750			(121,478)			
									2,385,407			2,372,115		2,305,468					2,372,668			2,217,872			
	Total Personnel																								
	Operating Expenses								Amended Budgeted Amount			Budgeted Amount		Budget Adj.		Amended Budgeted Amount			Budgeted Amount		Budget Adj.		Amended Budgeted Amount		
	General Expenses	6, 17, 18, 19	1-9						19,183			500		69,793		70,293			479		63,507		63,986		
	Travel	8	1-9						8,324			5,004		(4,194)		810			4,333		(1,265)		3,068		
	Training	4, 5, 7, 17	1-9						5,160			4,900		(1,975)		2,925			4,900		(904)		3,996		
	Outreach/Media/Promotion	17	1-9						-			-		-		-			-		-	-	-		
	Facility Costs (See Exhibit B, Attach II for breakdown)	11	1-9						-			-		-		-			-		-	-	-		
	Total Operating Expenses								32,667			10,404		63,624		74,028			9,712		61,338		71,050		
	Major Equipment (Unit Cost of \$5,000 or More)								Amended Budgeted Amount			Budgeted Amount		Budget Adj.		Amended Budgeted Amount			Budgeted Amount		Budget Adj.		Amended Budgeted Amount		
	Equipment	6, 17, 18, 20, 21	1-9						-			-		-		-			-		-	-	-		
	Vehicles	8, 17, 18, 19	1-9						-			-		-		-			-		-	-	-		
	Total Major Equipment								-			-		-		-			-		-	-	-		
	Subcontracts								Amended Budgeted Amount			Budgeted Amount		Budget Adj.		Amended Budgeted Amount			Budgeted Amount		Budget Adj.		Amended Budgeted Amount		
									-			-		-		-			-		-	-	-		
									-			-		-		-			-		-	-	-		
	Total Subcontracts								-			-		-		-			-		-	-	-		
	Indirect Costs								Amended Percent			Amended Percent		Budgeted Amount		Budget Adj.			Amended Budgeted Amount		Budget Adj.		Amended Budgeted Amount		
	Total Personnel Costs								24.1560%			24.1560%		593,028		(36,120)			593,167		(38,707)		554,460		
	Total Indirect Costs								576,218			593,028		(36,120)		556,908			593,167		(38,707)		554,460		
	Total Budget								\$ 2,994,292			\$ 2,975,547		\$(39,143)		\$ 2,936,404			\$ 2,975,547		\$(132,194)		\$ 2,843,353		

Year 1 Contract Amount \$ 2,994,292
 Year 1 Funding Changes \$ -
 Year 1 Checks/Balances \$ -

Year 2 Contract Amount \$ 2,936,404
 Year 2 Funding Changes \$ (39,143)
 Year 2 Checks/Balances \$ -

Year 3 Contract Amount \$ 2,843,353
 Year 3 Funding Changes \$ (132,194)
 Year 3 Checks/Balances \$ -

(1) costs will be reviewed by CDPH for approval

(2) Bilingual - Positions that receive Bilingual pay will show a higher budgeted amount. Justification and back-up documentation will be kept on file.

(3) Additional Pay (Longevity, Retention, Differential and COLA) - Positions that receive these compensations will show a higher budgeted amount. Justification and back-up documentation will be kept on file.

(4) Overtime - Requires justification if amount does not seem reasonable. Justification will be kept on file.

Fringe Benefits - Justification and back-up documentation will be kept on file for any fringe benefit rate that exceeds 50%.

(5) General Expenses - Includes items such as: Minor equipment (i.e., office furniture, IT equipment, anthropometric items, etc.), professional certifications, audit costs, vehicle maintenance, IT maintenance, program materials, office expenses (i.e., telephone services, printing, postage, supplies, etc.), etc.

(6) Travel - All costs reimbursed shall be in accordance with CalHR rates.

(7) Facility Costs - Includes Rent, Utilities, Janitorial, Security, and Maintenance.

(8) Major Equipment - Unit cost must be \$5,000 or more. Refer to Exhibit D, Provision 1 for procurement rules.

(9) Equipment - Includes items such as: Telephone systems, information technology equipment, photocopy machines, etc.

Vehicles - Will be used for Facility Site Visits, Conferences, Trainings, and Outreach.

Subcontractors - List the subcontractor's name and short list of services provided. If the subcontractor has not been selected, enter TBD and list of services to be provided.