

19068 JUL 10 2013

## EXECUTIVE DOCUMENT SUMMARY

State Form 41221 (R10/4-06)

Instructions for completing the EDS and the Contract process.



Received

JUL 25 2013

1. Please read the guidelines on the back of this form.
2. Please type all information.
3. Check all boxes that apply.
4. For amendments / renewals, attach original contract.
5. Attach additional pages if necessary.

IDOA Contracts

9/13

PT

1. EDS Number: A70-3-070452	2. Date prepared: 6/28/2013
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## 3. CONTRACTS &amp; LEASES

<input type="checkbox"/> Professional/Personal Services	<input type="checkbox"/> Contract for procured Services
<input checked="" type="checkbox"/> Grant	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Lease	<input type="checkbox"/> License Agreement
<input type="checkbox"/> Attorney	<input checked="" type="checkbox"/> Amendment# <u>2</u>
<input type="checkbox"/> MOU	<input type="checkbox"/> Renewal # <u>        </u>
<input type="checkbox"/> QPA	<input type="checkbox"/> Other <u>        </u>

## FISCAL INFORMATION

4. Account Number: 61900-30700.573100	5. Account Name: ISDH DOAg Fund
6. Total amount this action: \$6,173.00	7. New contract total: 206,179.00
8. Revenue generated this action: \$0.00	9. Revenue generated total contract: \$0.00
10. New total amount for each fiscal year:	
Year 2013	\$145,088.00
Year 2014	\$61,091.00
Year	\$
Year	\$

## TIME PERIOD COVERED IN THIS EDS

11. From (month, day, year): 8/12/2013	12. To (month, day, year): 9/30/2013
13. Method of source selection: <input type="checkbox"/> Negotiated	
<input type="checkbox"/> Bid/Quotation <input type="checkbox"/> Emergency <input type="checkbox"/> Special Procurement	
<input checked="" type="checkbox"/> RFP# 12-50 <input type="checkbox"/> Other (specify) <u>        </u>	

35. Will the attached document involve data processing or telecommunications systems(s)?

Yes: IOT or Delegate has signed off on contract

36. Statutory Authority (Cite applicable Indiana or Federal Codes):  
PL 95-627, 7 CFR, PART 246

37. Description of work and justification for spending money. (Please give a brief description of the scope of work included in this agreement.)

Additional funding for a 0.75 FTE to provide staff relief coverage to WIC clinics throughout the State with primary responsibility for a certain geographic area in coordination with the State WIC office. The Indiana Supplemental Food Program for Women, Infants and Children provides nutritious supplemental foods, nutrition education, and health care referrals to women, infants and children up to the age of five who are at nutritional risk and meet federal income guidelines (up to 185% of poverty).

38. Justification of vendor selection and determination of price reasonableness:

The State contracts with local sponsoring agencies to administer the Indiana WIC Program pursuant to Public Law 95-627, 7CFR, Part 246. This entity was awarded the contract through the State procurement bid process, RFP# 12-50. Funding is determined by a formula based on participant caseload.

39. If this contract is submitted late, please explain why: (Required if more than 30 days late.)

RECEIVED

JUL 30 2013

CAG-ADVISORY

40. Agency fiscal officer or representative approval 	41. Date Approved 7/19/13	42. Budget agency approval 	43. Date Approved 7/24/13
44. Attorney General's Office approval PRT	45. Date Approved 8/13/2013	46. Agency representative receiving from AG	47. Date Approved

86353-002

## REQUISITION

**Ship To:** State Department of Health  
Section 2-C  
2 N MERIDIAN ST  
INDIANAPOLIS IN 46204

**Bill to:** State Department of Health  
Section 2-C  
2 N MERIDIAN ST  
INDIANAPOLIS IN 46204

<b>Requisition No.</b>	<b>Date</b>	<b>Required Date</b>	<b>Page</b>
0000022162	07/11/2013		1 of 1
<b>Fund/Account:</b>	61900 / 573100		
<b>Dept Number:</b>	195070		
<b>Project Number:</b>	400361014250013		
<b>Requisition Number:</b>	0000022162		
<b>Requestor:</b>	GALLEN Allen, Gary-400		
<b>Agency Number:</b>	00400 Department of Health		
<b>Facility:</b>			

### MUST COMPLETE FOR ICPR

☐ Print REQ  
☐ Streamline Eligible

Line	Item	Description	Quantity	UOM	Unit Price	Ext Amt
1-1		WIC Program pursuant to Public Law 95-627, 7CFR, Part 246 Amend #3 A70-3-070452, 8/12/13-9/30/13	1.0000	LO	6,173.0000	6,173.00

**Vendor:** 0000071262 JOHNSON NICHOLS HEALTH CLINIC, INC

<< EDS# A70-3-070452  
EXISTING PURCHASE ORDER #13527265 >>

The following UN/CEFACT Unit of Measure  
Common Codes are used in this document:  
LO Lot

**Requisition Total \$ 6,173.00**

Requestor Signature	I certify that the item[s] requested is [are] necessary for the operation of this State Agency.	
	Printed Name of Agency Head or Authorized Employee	Authorized Signature

MSN

61900-573100-4003610142500  
WIC 597-2

**Amendment No. 2  
EDS Number A70-3-070452**

This is an Amendment to the existing **U.S.D.A. WIC Program Grant Agreement** entered into by and between the **Indiana State Department of Health** (hereinafter referred to as the "State") and **Johnson Nichols Health Clinic, Inc.** (hereinafter referred to as the "Grantee") for the period from **October 1, 2012** through **September 30, 2013**, in the amount of **\$200,006**.

In consideration of the mutual undertakings and covenants hereinafter set forth, the parties agree as follows:

The amount of the Grant Agreement is being increased by **\$6,173** making the new total of the Grant Agreement **\$206,179**. The additional funds will be used to **provide staff relief coverage to WIC clinics throughout the State with primary responsibility for a certain geographic area in coordination with the State WIC office**. See Attachment A-2, attached hereto, which replaces Attachment A-1, made a part hereof, and incorporated herein by reference as a part of this Grant Agreement.

The following paragraph replaces the previous Grant Agreement paragraph:

**Paragraph 43 – Federal and State Third-Party Contract Provisions** is added to read:

If part of the Grant involves the payment of federal funds, the Grantee and, if applicable, its contractors shall comply with the federal grant / contract provisions attached as Attachment D and incorporated fully herein.

All other matters previously agreed to and set forth in the original Grant Agreement and not affected by this Amendment shall remain in full force and effect.

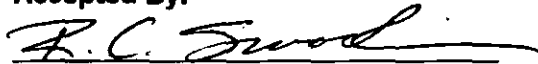
**Non-Collusion and Acceptance**

The undersigned attests, subject to the penalties of perjury, that he/she is the Grantee, or that he/she is the properly authorized representative, agent, member or officer of the Grantee, that he/she has not, nor has any other member, employee, representative, agent or officer of the Grantee, directly or indirectly, to the best of his/her knowledge, entered into or offered to enter into any combination, collusion or agreement to receive or pay, and that he/she has not received or paid any sum of money or other consideration for the execution of this Grant Agreement other than that which appears upon the face hereof.

The rest of this page has been left blank intentionally.

In Witness Whereof, the Grantee and the State of Indiana have, through duly authorized representatives, entered into this Grant Agreement Amendment. The parties having read and understanding the foregoing terms of the Grant Agreement Amendment do by their respective signatures dated below agree to the terms thereof.

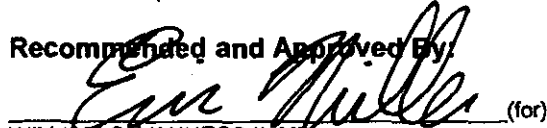
**Accepted By:**



RICHARD SMOCK  
CHAIRMAN OF THE BOARD  
JOHNSON NICHOLS HEALTH CLINIC, INC.

DATE: July 9, 2013

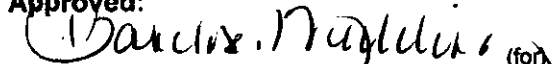
**Recommended and Approved By:**

 (for)

WILLIAM C. VANNESS II, MD  
STATE HEALTH COMMISSIONER  
INDIANA STATE DEPARTMENT OF HEALTH

DATE: 7/11/13

**Approved:**

 (for)

JESSICA ROBERTSON, COMMISSIONER  
DEPARTMENT OF ADMINISTRATION  
STATE OF INDIANA

DATE: 7.25.13

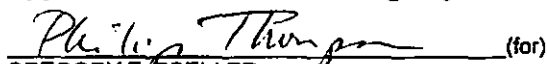
**Approved:**



BRIAN E. BAILEY, DIRECTOR  
STATE BUDGET AGENCY  
STATE OF INDIANA

DATE: 7/29/13

**Approved as to Form and Legality:**

 (for)

GREGORY F. ZOELLER  
ATTORNEY GENERAL OF INDIANA

DATE: 8/13/2013

## ATTACHMENT A-2

### Budget Summary

Grant Name	USDA WIC Program - FY 2013
Local Agency	JOHNSON NICHOLS HEALTH CLINIC
Clinic Operations Caseload	1223
Breastfeeding Promotion Caseload	196
FTE Breastfeeding Promotion	0.1
FTE Clinic Operations	2.88
Participants Per FTE Clinic Operations	425
Clinic Operations Amount	\$198,778.00
Breastfeeding Promotion Amount	\$7,401.00
Total Proposed Amount	\$206,179.00

Budget Line Item	Amount	Amended Amount	Amended Total
Communications Breastfeeding Promotion	\$462.00		\$462.00
Fringe Breastfeeding Promotion	\$1,225.00		\$1,225.00
Outreach Breastfeeding Promotion	\$1,491.00		\$1,491.00
Salaries Breastfeeding Promotion	\$4,012.00		\$4,012.00
Travel Breastfeeding Promotion	\$211.00		\$211.00
<b>Total Breastfeeding Promotion</b>	<b>\$7,401.00</b>	<b>\$0.00</b>	<b>\$7,401.00</b>
Communications Clinic Operations	\$4,250.00		\$4,250.00
Contract Services Clinic Operations	\$6,973.00		\$6,973.00
Fringe Clinic Operations	\$20,172.00	386.00	\$20,558.00
Nutrition Education Supplies Clinic	\$3,745.00		\$3,745.00
Salaries Clinic Operations	\$134,776.00	4,620.00	\$139,396.00
Space Cost Clinic Operations	\$14,650.00		\$14,650.00
Supplies Clinic Operations	\$3,208.00		\$3,208.00
Travel Clinic Operations	\$4,140.00	1,167.00	\$5,307.00
Travel Nutrition Education	\$691.00		\$691.00
<b>Total Clinic Operations</b>	<b>\$192,605.00</b>	<b>\$6,173.00</b>	<b>\$198,778.00</b>
<b>Total Amount</b>	<b>\$200,006.00</b>	<b>\$6,173.00</b>	<b>\$206,179.00</b>

Note: Additional funding for salary calculated as follows: \$22/hour \* 30 hours/week \* 7 weeks

**Attachment D**  
**C.F.D.A. Title: Special Supplemental Nutrition Program for Women, Infants, and Children**  
**EDS # A70-3-070452**

**Federal Agency: United States Department of Agriculture**

**C.F.D.A. Number: 10.557**

**Document ID Number: 2IN700002 Amendment 1**

**Award Name: Women Infants & Children**

**Award Year: 2013**

**1. Incorporation**

This award is based on the application, as approved, the Indiana State Department of Health (ISDH) submitted to the United States Department of Agriculture relating to the program and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation by statutory authority as provided by 42 U.S.C. § 1786 and 7 U.S.C. § 1746 and all other referenced codes and regulations.
- b. 45 CFR Part 74, 45 CFR Part 92, or 45 CFR Part 96, as applicable.
- c. The HHS Grants Policy Statement, including addenda in effect as of the beginning date of the budget period. (Parts I through III of the HHS GPS are currently available at <http://www.hrsa.gov/grants/hhsgrantspolicy.pdf>.)

The Contractor or Grantee (as defined in the Contract or Grant Agreement) must comply with all terms and conditions outlined in the grant award, including grant policy terms and conditions contained in applicable Grant Policy Statements; requirements imposed by program statutes and regulations and grant administration regulations, as applicable; and any regulations or limitations in any applicable appropriations acts.

**2. Federal Funds Disclosure Requirements**

Any of the entity's statements, press releases, requests for proposals, bid solicitations, and other documents describing projects or programs supported in whole or in part by federal funds must state a) the percentage of the total costs of the program or project with federal financing; b) the amount of federal funds for the project or program; and c) the percentage and dollar amount of the total costs of the project or program financed by nongovernmental sources. "Nongovernmental sources" means sources other than state and local governments and federally recognized Indian tribes.

Publications, journal articles, etc. produced under a grant support project must bear an acknowledgment and disclaimer, as appropriate, for example:

*This publication (journal article, etc.) was supported by award number 2IN700002 from the United States Department of Agriculture. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the United States Department of Agriculture.*

**3. Federal Funding Accountability and Transparency Act (FFATA)**

In order for ISDH to comply with federal reporting requirements, Contractor or Grantee must complete, in its entirety, the attached form, titled Transparency Reporting Subawardee Questionnaire. If the pre-populated information in the form regarding Contractor or Grantee is incorrect, Contractor or Grantee should strike the incorrect information and enter the correct information. ISDH will not execute this agreement until Contractor or Grantee completes the form in its entirety.

**4. Federal Lobbying Requirements**

- A. The Contractor or Grantee certifies that to the best of its knowledge and belief that no federal appropriated funds have been paid or will be paid, by or on behalf of the Contractor or Grantee, to any person for influencing or attempting to influence an officer or employee of

**Attachment D**

**C.F.D.A. Title: Special Supplemental Nutrition Program for Women, Infants, and Children  
EDS # A70-3-070452**

any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan or cooperative agreement.

- B. If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this federal Contract, contract, loan, or cooperative agreement, the Contractor shall complete and submit "Disclosure Form to Report Lobbying" in accordance with its instructions.
- C. The Contractor or Grantee shall require that the language of subparagraphs A) and B) be included in the language of all subcontracts and that all subcontractors shall certify and disclose accordingly.

**5. Prohibited Activities**

In accordance with 7 CFR Part 16.3(b):

*Organizations that receive direct USDA assistance under any USDA program may not engage in inherently religious activities, such as worship, religious instruction, or proselytization, as part of the programs or services supported with direct USDA assistance. If an organization conducts such activities, the activities must be offered separately, in time or location, from the programs or services supported with direct assistance from USDA, and participation must be voluntary for beneficiaries of the programs or services supported with such direct assistance.*

**6. Nondiscrimination Statement**

Contractor or Grantee agrees to post the following nondiscrimination statement and keep it updated in accordance with ISDH guidance:

*The U.S. Department of Agriculture prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)*

For more information, please contact the ISDH Office of Grants Management.