

**CITY OF EL PASO, TEXAS
AGENDA ITEM
DEPARTMENT HEAD'S SUMMARY FORM**

DEPARTMENT: Public Health

AGENDA DATE: CCA 071012

CONTACT PERSON NAME AND PHONE NUMBER: Michael Hill, 771-5702

DISTRICT(S) AFFECTED: All

SUBJECT:

That the City Manager be authorized to sign and submit an amendment to DSHS (Department of State Health Services) Contract No. #2012-040466 for its STD-HIV program, to change the end date to August 31, 2012 from October 1, 2012 and to reduce the amount by \$57,612 for a new total amount of \$115,224.00, to allow the City to conduct programs to control and prevent the spread of sexually transmitted diseases, and that the City Manager be authorized to sign any amendments thereto to extend the project for up to twelve months, to make adjustments to the contract program budget that do not change the contract amount, and to sign all related certifications.

BACKGROUND / DISCUSSION:

PRIOR COUNCIL ACTION:

AMOUNT AND SOURCE OF FUNDING:

*****REQUIRED AUTHORIZATION*****

DEPARTMENT HEAD:



RESOLUTION

BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF EL PASO:

THAT the City Manager be authorized to sign and submit an amendment to DSHS Contract No. #2012-040466 for its STD-HIV program, to change the end date to August 31, 2012 from October 1, 2012 and to reduce the amount by \$57,612 for a new total amount of \$115,224.00, to allow the City to conduct programs to control and prevent the spread of sexually transmitted diseases, and that the City Manager be authorized to sign any amendments thereto to extend the project for up to twelve months, to make adjustments to the contract program budget that do not change the contract amount, and to sign all related certifications.

PASSED AND APPROVED this _____ day of _____, 2012.

CITY OF EL PASO

John F. Cook
Mayor

ATTEST:

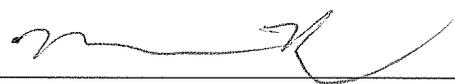
Richarda Duffy Momsen
City Clerk

APPROVED AS TO FORM:



Josette Flores
Assistant City Attorney

APPROVED AS TO CONTENT:



Michael Hill, Director
Department of Public Health

DEPARTMENT OF STATE HEALTH SERVICES



Amendment
To

The Department of State Health Services (DSHS) and CITY OF EL PASO (Contractor) agree to amend the Program Attachment # 001 (Program Attachment) to Contract # 2012-040466 (Contract) in accordance with this Amendment No. 001A : STD - HIV, effective 06/01/2012.

The purpose of this Amendment is to change the end date of the contract term to 08/31/2012 and to reduce the total contract amount.

Therefore, DSHS and Contractor agree as follows:

The program attachment number is revised as follows:

PROGRAM ATTACHMENT NO. ~~001~~ 001A

The contract term is revised as follows:

TERM: 01/01/2012 THRU: ~~12/31/2012~~ 08/31/2012

SECTION II. PERFORMANCE MEASURES, Reporting Requirements, is revised as follows:

1. Narratives and Objectives- Complete and accurate semi-annual reports, detailing how Contractor met all its requirements under this Program Attachment during each reporting period, are due ~~semi-annually~~ on or before July 30, 2012 for the period January 1, 2012 - June 30, 2012, and January 30, 2013 - October 1, 2012 for the period July 1, 2012 - August 31, 2012, in a manner and in a format provided by DSHS Program.

The categorical budget is revised as attached.

All other terms and conditions not hereby amended are to remain in full force and effect. In the event of a conflict between the terms of this contract and the terms of this Amendment, this Amendment shall control.

Department of State Health Services

Contractor

Signature of Authorized Official

Date: _____

Bob Burnette, C.P.M., CTPM

Director, Client Services Contracting Unit

1100 WEST 49TH STREET
AUSTIN, TEXAS 78756

(512) 458-7470

Bob.Burnette@dshs.state.tx.us

Signature of Authorized Official

Date: _____

Name: Joyce A Wilson

Title: City Manager

Address: 2 Civic Center Plaza
El Paso, TX 79901

Phone: 915-771-5707

Email: GallegosMA@elpasotexas.gov



DEPARTMENT OF STATE HEALTH SERVICES



1100 WEST 49TH STREET
AUSTIN, TEXAS 78756-3199

CATEGORICAL BUDGET CHANGE REQUEST

DSHS PROGRAM: STD - HIV
CONTRATOR: CITY OF EL PASO
CONTRACT NO: 2012-040466
CONTRACT TERM: 01/01/2012
BUDGET PERIOD: 01/01/2012

THRU: 08/31/2012
THRU: 08/31/2012

CHG: 001A

DIRECT COST (OBJECT CLASS CATEGORIES)			
	Current Approved Budget (A)	Revised Budget (B)	Change Requested
Personnel	\$126,773.00	\$71,322.00	\$(55,451.00)
Fringe Benefits	\$41,661.00	\$41,661.00	\$0.00
Travel	\$1,836.00	\$1,332.00	\$(504.00)
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$1,126.00	\$720.00	\$(406.00)
Contractual	\$0.00	\$0.00	\$0.00
Other	\$1,440.00	\$189.00	\$(1,251.00)
Total Direct Charges	\$172,836.00	\$115,224.00	\$(57,612.00)
INDIRECT COST			
Base (\$)	\$0.00	\$0.00	\$0.00
Rate (%)	0.00%	0.00%	0.00%
Indirect Total	\$0.00	\$0.00	\$0.00
PROGRAM INCOME			
Program Income	\$0.00	\$0.00	\$0.00
Other Match	\$0.00	\$0.00	\$0.00
Income Total	\$0.00	\$0.00	\$0.00
LIMITS/RESTRICTIONS			
Advance Limit	\$0.00	\$0.00	\$0.00
Restricted Budget	\$0.00	\$0.00	\$0.00
SUMMARY			
Cost Total	\$172,836.00	\$115,224.00	\$(57,612.00)
Performing Agency Share	\$0.00	\$0.00	\$0.00
Receiving Agency Share	\$172,836.00	\$115,224.00	\$(57,612.00)
Total Reimbursements Limit	\$172,836.00	\$115,224.00	\$(57,612.00)
JUSTIFICATION			
Amendment to change contract term to state fiscal year per bundling of LHD contracts.			

Financial status reports are due: 04/30/2012, 07/31/2012, 10/31/2012