

**Systems Change to Reduce Cancer Risk by Increasing Access to
HPV Vaccinations**

APPLICATION GUIDELINES

FY 2019-2021

Florida Department of Health

Division of Community Health Promotion

October 23, 2018

Application Deadline:

November 26, 2018

THIS GRANT OPPORTUNITY IS NOT SUBJECT TO Section 120.57 (3), FLORIDA STATUTES

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TIMELINE
RFA Number 18-003

Prospective applicants shall adhere to the RFA timelines as identified below. It is the applicants' responsibility to regularly check the Vendor Bid System and the Department's website for updates.

SCHEDULE	DUE DATE	LOCATION
Request for Applications Released and Advertised	October 23, 2018	Posted electronically via: http://www.myflorida.com/apps/vbs/vbs_www.main_menu
ONLY emailed Submission of Written Questions Accepted	Prior to November 7, 2018 at 12:00 p.m., E.S.T.	Submit questions by email with the subject heading "RFA #18-003, Question No. ____" to Tamika.Fields@flhealth.gov and copy Uneeda.Brewer@flhealth.gov
Responses to All Questions Posted	November 16, 2018	Posted electronically via: http://myflorida.com/apps/vbs/vbs_www.main_menu
ONLY mailed Applications will be Accepted	Prior to December 7, 2018 at 5:00 p.m.	Submit to: Office of Contracts RFA #18-003 4052 Bald Cypress Way Bin # B08 Tallahassee, Florida 32399
Anticipated Evaluation of Applications	December 19, 2018	Review and Evaluation of Applications Begins
Anticipated Posting of Grant Awards	December 28, 2018	Posted electronically via: http://myflorida.com/apps/vbs/vbs_www.main_menu

Section 1.0 INTRODUCTION

1.1 Program Authority

The program is authorized by sections 385.103 and 381.925, Florida Statutes.

1.2 Notice and Disclaimer

Grant awards will be determined by the Florida Department of Health (the Department) in accordance with this publication based on the availability of funds. The Department reserves the right to offer multiple grant awards if it deems it is in the best interest of the state of Florida and the Department. Additionally, the Department reserves the right to negotiate with applicants prior to the offer of a grant award or execution of the contract. If during the grant funding period, the authorized funds are reduced or eliminated by the Centers for Disease Control and Prevention (CDC) (the grantor agency) or by the Legislature, the Department may immediately reduce or terminate the grant award by written notice to the selected applicants. The termination or reduction will not apply to allowable costs already incurred by the selected applicants to the extent that funds are available for payment of such costs.

Note: The receipt of applications in response to this publication does not imply or guarantee that any one or all qualified applicants will be awarded a grant or result in a contract with the Department.

1.3 Program Purpose

The Department is accepting applications to implement organized approaches to increase human papillomavirus (HPV) vaccination rates among patients in the priority population within health systems through evidence-based interventions (EBIs) recommended by the Community Preventive Service Task Force (CPSTF).

The applicant will be responsible for meeting the following intervention goals:

- A. Determine baseline rates for HPV vaccination within the health system's individual clinics.
- B. Assess operating policies and procedures for identifying patients eligible for HPV vaccination.
- C. Implement process improvements to address deficiencies within the health system's policies and procedures.
- D. Measure changes in HPV vaccination rates for the priority population within each health system's individual clinics.

The applicant will achieve intervention goals by participating in a comprehensive organizational assessment including staff interviews, clinical workflow observations, policy and procedural document reviews, chart audits, and electronic health record screening rate determination to develop an implementation plan (IP) with Program partners. The IP will include at least two recommended EBIs, supporting strategies, and planned activities, which adhere to EBI strategies, such as participating in ongoing monitoring and technical assistance activities, data reporting, and evaluation activities by the health system, that include processes for data collection. The applicant will be responsible for implementing the planned activities of the IP within each health system's individual clinics. The applicant must agree to work in collaboration with other Comprehensive Cancer Control Program (Program) partners, which include the local Breast and Cervical Cancer Early Detection Program Coordinator and Vaccine for Children Program.

1.4 Definitions

Advisory Committee on Immunization Practices (ACIP): A committee that provides advice, guidance, and recommendations on the control of vaccine-preventable diseases in the United States population.

Application: The complete written response of the applicant to the RFA including properly completed forms, supporting documents, and attachments.

Community Preventive Service Task Force (CPSTF): An independent, nonfederal panel of public health and prevention experts that provides evidence-based findings and recommendations about community-based preventive services, programs, and other interventions.

Completion Rate: The final dose of HPV vaccine that is administered six months or more after the first dose.

Contract Manager: An individual designated by the Department to be responsible for the monitoring and management of the Contract.

Contract: The formal agreement or order that will be awarded to the successful applicant under this RFA, unless indicated otherwise.

Evidence-Based Intervention (EBI): An intervention designed to implement one or more strategy linking public health or clinical practice recommendations to scientific evidence of the effectiveness and other characteristics of such practices recommended by the CPSTF.

EBI Strategy: A strategy which adheres to an EBI.

Florida Cancer Data System: A population-based cancer registry that is mandated by the state of Florida legislature.

Florida Cancer Plan: The state's cancer control and research plan developed by the Florida Cancer Control and Advisory Council pursuant to section 1004.425(4)(a), Florida Statutes.

Health System: A group of independent, interrelated elements (i.e. individuals, institutions, and infrastructures) that form a unified whole to promote and protect the health of people through the implementation of essential public health services.

Human Papillomavirus (HPV): A virus which effects the basal layer of the skin and mucosal epithelia, causing disease such as warts and tumors in parts of the mouth, throat, genitals, and anus.

Initiation Rate: The first administered dose of HPV vaccine.

Intervention: The project intended for funding through this grant.

Implementation Plan (IP): A formalized strategy adopted by a public health system which outlines action steps that will be taken within the funding period and beyond to increase HPV vaccination rates.

National Immunization Survey: A group of surveys conducted via telephone by the Centers for Disease Control and Prevention's (CDC) National Center for Immunization and Respiratory Diseases.

Patient: A person that is receiving medical treatment.

Policies: Laws, regulations, and formal rules that are adopted to guide individual and collective behavior within an organization.

Policy Change: Any alteration of policy that enhances primary, secondary, and tertiary prevention of cancer; effects systems changes; and has broad reach implications in the Health System and local population of those at risk for or affected by cancer.

Priority Population: A population of people recommended for the HPV vaccination by the ACIP who will benefit from the intervention. **Supporting Strategies:** Strategies that have not been scientifically proven to increase vaccination rates, but can support the implementation of the EBI and can be implemented in tandem with EBI strategies.

Systems Change: Occurs when one or several elements in a system are markedly improved, substantially altering the relationship of elements to one another and the overall structure of the system itself.

Vendor Bid System (VBS): Refers to the state of Florida internet-based vendor information system, which is available at: http://vbs.dms.state.fl.us/vbs/main_menu.

1.5 Available Funding

The funds available under the grant are provided by the Center for Disease Control (CDC). One to two applications may be funded for a total amount not to exceed \$32,500.00, per applicant, over a two-fiscal year period, July 1, 2019, to June 30, 2021. At least 60 percent of funds must be expended within the first fiscal year, July 1, 2019, to June 30, 2020, and the remainder of funds must be expended within the second fiscal year, July 1, 2020, to June 30, 2021.

1.6 Matching Funds

The applicant must match a minimum of five percent of the award in-kind as a requirement for this application.

Section 2.0 PROGRAM OVERVIEW

2.1 Background

The Department's mission is to promote and protect the health and safety of all people in Florida through the delivery of quality public health services and the promotion of health care standards. The Program, within the Department's Bureau of Tobacco Free Florida, is funded by a five-year CDC cooperative agreement that began on June 30, 2017. The cooperative agreement requires that the Program align funding with the goals and objectives of the Florida Cancer Plan. Funding supports a regional cancer control collaborative infrastructure and a statewide network of partners to enhance communication and collaboration on cancer control efforts, reduce service duplication, leverage support, and support implementation of strategic, data-driven initiatives to address the Florida Cancer Plan. This funding opportunity seeks to increase HPV vaccine initiation rates and completion rates by implementation of EBI strategies in health systems. Eligible health systems must have a HPV vaccine initiation rate at or below the state rate of 55.9 percent and be able to demonstrate a strong organizational culture ready for systems change, a commitment of leadership and staff, a capacity for expanding reach across multiple sites within the organization's network, and experience implementing quality improvement projects.

Implementation of EBIs supported through this funding will be based on recommendations from the CPSTF, and applicants are required to adhere to such recommendations, which are outlined by CPSTF in the following publications:

- Community Preventive Services Task Force, “Recommendation for use of Immunization Information Systems to Increase Vaccination Rates.” *Journal of Public Health Management & Practice*, vol. 21, no. 3, 2015, pp.249-52, available at: http://journals.lww.com/jphmp/Fulltext/2015/05000/Recommendation_for_Use_of_Immunization_Information.3.aspx; and
- Groom H, Hopkins DP, Pabst LJ, et al., “Immunization Information Systems to Increase Vaccination Rates: A Community Guide Systematic Review.” *Journal of Public Health Management & Practice*, vol. 21, no. 3, pp.227-48, available at: http://journals.lww.com/jphmp/Fulltext/2015/05000/Immunization_Information_Systems_to_Increase.2.aspx.

2.2 Priority Health Areas

This grant is intended to provide support for the assessment of HPV vaccination rates among patients in the priority population within well-defined health systems for the purpose of increasing HPV vaccination rates, based on the recommendations by ACIP, which are available at <http://dx.doi.org/10.15585/mmwr.mm6549a5>, through implementation of recommended EBIs as specified in section 2.1 In addition, this grant is intended to measure initiation and completion rates for the priority population and to measure initiation and completion rates for persons younger than 11 years of age or older than 15 years of age if such data is relevant to the EBI. Other populations served by the intervention will not require reporting.

2.3 Program Expectations

The applicant will be responsible for working collaboratively with the Program and Program partners to address intervention requirements and implement IP activities, including developing or updating policies regarding the selected EBI strategies, establishing vaccination goals, tracking the vaccination rates, and implementing the EBIs.

2.4 Applicant Project Results

The applicant must identify anticipated intervention results that are consistent with the overall program purpose as specified in Section 1.3 and requirements, as follows:

1. Develop and Implement an IP:

- A. Within the first 30 days, develop an IP in collaboration with the Program partners that includes at least two recommended EBIs and supporting strategies; and
- B. Implement IP activities (EBIs, etc.) within each health system’s individual clinics.

2. Measure Impact of Vaccination Rates:

- A. On a quarterly basis during the grant period participate in technical assistance; and
- B. Monitor, track, and report IP activities, including processes for data collection.

2.5 Current and Prior Funded Projects

Applicants should demonstrate achievements from prior quality improvement efforts that required policy or systems change, staff engagement, and individual impact assessment. Such achievements should identify how changes made were sustainable and include process and workflow improvements, increased number of patients served, and how improvement was measured.

2.6 Project Requirements

Key requirements of the intervention and its impact include the following:

1. Develop or update policies regarding the selected EBI strategies;
2. Establish system-wide and clinic-level vaccination goals and track baseline vaccination rates for initial rate and completion rate stratified by patient age and gender within the health system's individual clinics;
3. Implement EBI strategies among priority patients to increase the number of orders or referrals for vaccinations, vaccinations provided stratified by dose, patients who completed an office visit, patients who refused vaccination, patients who did not respond to reminders, and providers who responded to reminders;
4. Assess the needs and existing capacity to effectively conduct HPV vaccinations;
5. Develop new or updated policies with specific age categories, individuals between the ages of 9 to 26 years of age; methods; and intervals for vaccination;
6. Identify a defined target population within the priority population;
7. Establish a management team responsible for implementation of the EBI;
8. Maintain a quality assurance structure to monitor implementation progress, data reporting, and evaluation activities;
9. Maintain ongoing communication with the Program and Program Partners to address any technical assistance needs;
10. Develop an IP that includes at least two recommended EBI strategies and supporting strategies from the CPSTF as specified in Section 2.1; and
11. Increase HPV vaccination rates within the target population.

Section 3.0 TERMS AND CONDITIONS OF SUPPORT

3.1 Eligible Applicants

Eligible applicants must be able to demonstrate the internal capacity to identify, monitor, and provide technical assistance to health systems to be eligible for funding. Personnel responsible for overseeing part or all of this intervention must have a strong working knowledge of process flow within proposed system for intervention as well as assets available to address goals of this intervention. (Applicants must be willing to submit to the system evaluation as specified in Section 8.1. prior to the grant period.)

3.2 Eligibility Criteria

In order to be eligible for funding, eligible applicants should currently use or commit to use a Food and Drug Administration (FDA) approved, 9-valent HPV vaccine currently recommended by the ACIP and partner with one or more of the following organizations that meets the stated criteria:

1. A Federally Qualified Health Center (FQHC) in good standing with Health Resources and Services Administration (HRSA) FQHC Grantee requirements;
2. A Patient Center Medical Home (PCMH) recognized, accredited, or certified (Level 2 or 3, if applicable) by the National Committee for Quality Assurance;

3. A pediatric provider recognized, accredited, or certified by National Committee for Quality Assurance (NCQA) or American Accreditation HealthCare Commission; or
4. A federally recognized organization partnering with a pediatric provider, a FQHC, or a PCMH that is accredited or certified as in the aforementioned criteria.

3.3 Minority Participation

In keeping with the One Florida Initiative, the Department of Health encourages minority business participation in all its procurements. Applicants are encouraged to contact the Office of Supplier Diversity at 850-487-0915 or visit their website at <http://osd.dms.state.fl.us> for information on becoming a certified minority or for names of existing certified minorities who may be available for subcontracting or supplier opportunities.

3.4 Corporate Status

For all corporate applicants, proof of corporate status must be provided with the application. Tax-exempt status is not required, except for applications applying as non-profit organizations. A statement from a state taxing body, State Attorney General, or other appropriate state official, certifying that the applicant has a non-profit status and that none of the net earnings accrue to any private shareholders or individuals is appropriate evidence. Tax-exempt status is determined by the Internal Revenue Service (IRS) Code, Section 501(c)(3).

Non-Corporate Status

Documentation that verifies the official not-for-profit status of an organization in accordance with Chapter 617, Florida Statutes, must be provided with the application.

3.5 Period of Support

Selected applicants will receive an award of up to \$20,000 for the 12-month budget period of July 1, 2019, to June 30, 2020, and \$12,500 for the 12-month budget period of July 1, 2020, to June 30, 2021.

3.6 Use of Grant Funds

Applicants must provide a detailed description of how the funds will be used. Costs not allowed (in addition to those listed below) may be found at:

http://www.myfloridacfo.com/aadir/reference_guide/Reference_Guide_For_State_Expenditures.pdf

Grant funds may be requested to cover cost of:

- Consultants to support the intervention
- Personnel to implement the intervention
- Minor software upgrades for the monitoring and evaluation of the intervention
- Materials and supplies
- Travel expenses to support the intervention

Funds may not be used for:

- Building alterations or renovations
- Medical supplies
- Diagnostics or treatment
- Construction

- Direct services (e.g., supporting direct patient services such as counseling)
- Equipment
- Food or beverages
- Fringe benefits for temporary employees
- Fund raising activities
- Grant writing services
- Political education or lobbying
- Research
- Any other expenditures not authorized by law

Section 4.0 **APPLICATON REQUIREMENTS**

4.1 **Application Forms**

Applicants must use the official forms attached to this RFA in section 9.0. Alternate forms may not be used.

4.2 **Order of Application Package**

Provide the following items in the following order in the application package. All items in bold can be found in the application package.

- Cover Page
- Table of Contents
- Project Narrative (Including narrative in section 5.1 and required forms in section 9.1 of this application)
- **Budget Information Forms** (see sections 4.3 and 9.2 of this application)
- Detailed Budget Justification Narrative (see section 4.3 of this application)
- Personnel Form
- Documentation that verifies official status of a Community-Based Organization (501(c)(3)) status (if applicable)
- Documentation that verifies the official not for profit status of an organization in accordance with Chapter 617, Florida Statutes, (if applicable)
- Letters of support or commitment to the proposed intervention from an authorized official such as the Administrator or Director of a local county health department

Note: If funding is requested in an amount greater than the ceiling of the award range, the application will be considered non-responsive and will not be entered into the review process. The application will be returned with notification that it did not meet the submission requirements.

4.3 **Compliant Budget Form and Budget Justification Narrative**

In addition to filling out the budget form located in the application, a separate budget justification narrative and computation of expenditures must be provided and include the following information:

- Personnel cost by position supported;
- Costs for system enhancements which facilitate the collection and monitoring of populations supported through this intervention;
- Cost itemized by sub-contracted entity; and

- In-kind funds and resources leveraged by type such as meeting and conference support, media and publishing, personnel, printing, supplies, travel, and other. All funds and categories must be specified.

Applicants should recognize that costs do not remain static; the budget should reflect the various phases and activities of planning, organizing, implementation, evaluation, and dissemination.

Section 5.0 REQUIRED CONTENT OF THE PROJECT NARRATIVE SECTION

5.1 Project Narrative

Applicant Project Narrative should be no more than **6 pages in length, double spaced in a 12 point, Times New Roman font** and cover key aspects of the Statement of Need, Objectives, Program Plan, Evaluation Plan, Management Plan, and Appendices. (See sections 5.2-5.7 of this application).

Note: Page limit applies only to the Project Narrative. The required forms are not included in the page limit (See section 9.0).

5.2 Statement of Need

The applicant will define the need for service support within the health system this intervention will support by comparing disease burden by HPV-related disease incidence and mortality (cervical, oropharyngeal, anal, vaginal, vulvar, and penile cancers) within the health system service area to the local health system's capacity to address this burden (trained personnel, facility space and equipment, annual vaccination trends, total vaccination eligible population, and ability to define and track patients). Statement of Need will include:

A. Disease burden due to HPV-related infections and cancers for geographic areas that will be impacted by this intervention including incidence and mortality rates; and

B. Population estimates for the region and applicant system which meet ACIP recommended HPV vaccination guidelines.

5.3 Objectives

The aim of this grant is to increase HPV vaccination demand and vaccination rates. The selected applicant or applicants should be able to demonstrate the short-term impact within the grant period as well as potential for long-term sustained impact. By the end of the grant period, the selected applicant or applicants must be able to show how HPV vaccination rates for the priority population within the health system were impacted.

5.4 Program Plan

The applicant must outline administrative and evaluative support necessary for implementation of at least two of the following recommended EBI strategies: provider assessment and feedback, provider reminders, and patient reminders. The applicant must also outline how materials, trainings, and other support provided to personnel within the health system will facilitate easier navigation of patients to services. The applicant must also outline processes for data collection within the health system, which will include a detailed assessment of the priority populations and a process for monitoring of short term outcomes (E.g., patients educated, health care staff educated, or vaccination provided) (See section 2.4).

5.5 Evaluation Plan

The applicant will provide their process to evaluate intervention activities, define how challenges identified through the evaluation will be addressed, and determine how progress measured through evaluation will be shared. The evaluation plan must describe:

- Expected result (i.e., measurable impact or outcome) for each major objective;
- Intervals for measuring intervention progress;
- Process for sharing evaluation results with Program partners involved; and
- The potential for replication.

Evaluation activities are expected to be implemented at the beginning of the intervention to capture and document actions contributing to outcomes. The evaluation plan must be able to produce documented results that demonstrate whether and how the EBI strategies funded made a difference in the improvement in access to care services and the elimination of health disparities.

5.6 Management Plan

Administration and management strategies that will be used in the grant must include or indicate the following:

- Relevant qualifications of proposed key staff for the intervention. Provide a resume for each proposed staff.
- The level of effort for each proposed key staff position (e.g. 30 hours per week, 0.75 full-time equivalent), including pertinent staff provided on an in-kind basis.
- Position or job descriptions for staff positions, including those to be filled.

5.7 Appendices

All appendices must be clearly referenced and support elements of the narrative. Examples include:

- Partner agreements or letters of support
- Sample data collection instruments
- Proposed timeline for intervention

Section 6.0 SUBMISSION OF APPLICATION

6.1 Application Deadline

Applications must be received by December 7, 2018, at 5:00 p.m.

6.2 Submission Methods

Applications may only be submitted in written or printed form by express/regular mail or hand-delivered.

6.3 Mailed or Hand-Delivered Applications

Applicants are required to submit two copies of the application via express/regular mail or hand-delivered. The original application must be signed by an individual authorized to act for the applicant agency or organization and to assume for the organization the obligations imposed by the terms and conditions of the grant.

Mailed or hand-delivered applications will be considered as meeting the deadline if they are received by the Office of Contracts by December 7, 2018, at 5:00 p.m. Applicants are encouraged to submit applications early. Applications that do not meet the deadline will be deemed non-responsive and returned to the applicant unread.

6.4 Where to Send Your Application

Express/Regular Mail or Hand Delivered Applications:
Office of Contracts
RFA # _____
4052 Bald Cypress Way Bin # B08
Tallahassee, Florida 32399

Section 7.0 EVALUATIONS OF APPLICATONS

7.1 Receipt of Applications

Applications will be screened upon receipt. Complete applications are those that include the required forms in the Required Forms Section of this application. Applications that are not complete, or do not conform to or address the criteria of the program, will be considered non-responsive. An incomplete application will be returned with notification that it did not meet the submission requirements and will not be entered into the review process.

Applications will be scored by an objective evaluation team.

7.2 How Applications are Scored

Applications will be scored by the evaluation team in the areas indicated below. The raw scores in each evaluation area will be averaged together to determine each application score.

Evaluation Criteria	Maximum Points
Define Need – Section 7.2.1.	20
Project Feasibility – Section 7.2.2.	20
Project Replicability – Section 7.2.3.	10
Benefit Analysis – Section 7.2.4.	20
Systems Change – Section 7.2.5.	30

7.2.1. Define Need

- Applicants should clearly identify the number of patients in the health system within the priority population that will be supported; the current initiation and completion rate for patients in the health system within the priority population; and the infrastructure that is currently in place to support vaccination services including policies and procedures, patient reminder practices, and provider reminder practices.
- The need should identify community level data for cancer incidence and mortality using the Florida Cancer Data System and vaccination rates by region using the National Immunization Survey compared to stratified rates by clinic, age group, or other devisor that helps define a need or disparity in HPV vaccinations.

7.2.2. Project Feasibility

- Applicants should estimate the scope of the intervention by creating a timeline for implementation of the intervention in the health system, which includes a preparation and planning period.
- Applicants should estimate the oversight needed, such as the hours required by personnel, to increase initiation and completion rates for patients within the priority population.
-
- Applicants should identify stakeholders that will be key to the success of the intervention and how these individuals will be recruited and supported during the intervention period.
- Applicants should specify how policies and procedures will be improved, staff will be trained, patients will be engaged, and human and physical resources will be leveraged to achieve these changes.
- Applicants should identify infrastructure, such as an electronic health record system, that will be used to measure the change in patient vaccination rates, staff support, and technical assistance.

7.2.3. Project Replicability

- An application should be designed as a model for continued use. Parameters for the planning and execution should be easy to understand and have the potential to be widely reproduced with little or no additional support or guidance needed by another organization in any setting.
- An application should identify how partnerships will leverage community assets and resources, local dignitaries and leaders, media, and faith-based leaders to increase HPV vaccination demand and utilization within the priority population.
- An application should outline how processes and impacts assessed will be used to make improvements within the health system and support efforts of other partner health systems to increase vaccination rates.

7.2.4. Benefit Analysis

- Applicants should estimate the impact of the intervention including the number of individuals likely referred to the health system as a result of the intervention and the target improvement goal.
- Applicants should estimate the impact of the intervention within the priority population in terms of cost, such as dollars per patient in the priority population vaccinated, and include target improvement goals for identifying success.

7.2.5. Systems Change

- Applications should indicate how the intervention will have a sustained impact by permanently improving systemic barriers and challenges to supporting access to HPV vaccinations.
- Applicants should outline how education and reminder systems for patients or providers will continue past the grant cycle.
- Applicants should indicate how the collaboration with Program partners in the execution of the intervention will continue past the funding period.

7.3 Grant Awards

A grant may be awarded to one or two applicants based on the availability of funds.

7.4 Award Criteria

Funding decisions will be determined by the Program Administrator and Director based on consideration of the recommendations and ratings of the evaluation team. Funding an award determination is at the discretion of the Department.

7.5 Funding

The Department reserves the right to negotiate the proposed plans and final funding prior to execution of contracts.

7.6 Posting of Awards

Awards will be listed on the website at: http://myflorida.com/apps/vbs/vbs_www.main_menu on or about December 28, 2018.

Section 8.0 REPORTING AND OTHER REQUIREMENTS

8.1 Post-Award Requirements

Funded applicants will be required to submit:

1. A complete organizational assessment of organizational data, current infrastructure, processes, procedures, and other relevant HPV vaccination related data to inform the IP to increase HPV vaccination rates within the applicant's health system and by individual clinics supported;
2. Determine a final and accurate baseline for HPV vaccination rate by clinic through chart audits and electronic health record validations in collaboration with the Program and Program partners;
3. Deliverables in accordance with the Attachment I;
4. Performance Measures pursuant to section 215.971(b), Florida Statutes, the resulting Contract must contain performance measure which specify the required minimum level of acceptable service to be performed. These will be established based on final determination of tasks and deliverables; and
5. Financial Consequences pursuant to 215.971(c), Florida Statutes, the Contract resulting from this solicitation must contain financial consequences that will apply if Applicant fails to perform in accordance with the Contract terms. The financial consequences will be established based on final determination of the performance measures and Contract amount.

The Department reserves the right to evaluate the organization administrative structure, economic viability, and ability to deliver services prior to final award and execution of the contract.

Section 9.0 REQUIRED FORMS

9.1 Application for Funding

The applicant’s application should include a narrative section (no more than six pages – see section 5.1) and an outline using the following format:

Intervention Title			
Priority Strategy #1:			
S.M.A.R.T. Objective¹:			
Key Partners (Select all that apply)	<input type="checkbox"/> Primary healthcare provider <input type="checkbox"/> Cancer Center <input type="checkbox"/> Community-based Organization <input type="checkbox"/> Interest Group <input type="checkbox"/> Other:		
Intervention Description and Justification	Intervention (or Collaborating) Partners	Baseline # for Selected Population and # for Intervention Target¹	Deliverables
Action Steps	Person Responsible	Measures	Timeframe
Budget Item and Description			Amount
Priority Strategy #2:			
S.M.A.R.T. Objective¹:			
Key Partners (Select all that apply)			
<input type="checkbox"/> Primary healthcare provider <input type="checkbox"/> Cancer Center <input type="checkbox"/> Community-based Organization <input type="checkbox"/> Interest Group <input type="checkbox"/> Other:			
Intervention Description and Justification	Intervention (or Collaborating) Partners	Baseline # for Selected Population and # for Intervention Target¹	Deliverables
Action Steps	Person Responsible	Measures	Timeframe
Budget Item and Description			Amount

¹ Specify the population that will be supported through the intervention

9.2 Budget Information

ITEM	BUDGET AMOUNT	IN-KIND (ESTIMATED VALUE)
TOTAL SALARIES (give cost per hour and total)	\$ _____	\$ _____
TOTAL FRINGE BENEFITS (FICA, Unemployment, Worker Compensation, Medical/Dental Insurance, Pension)	\$ _____	\$ _____
OTHER EXPENSES (INCLUDE, BUT NOT LIMITED TO):		
Meeting and Travel Expenses	\$ _____	\$ _____
Office Rent	\$ _____	\$ _____
Phone/Fax/Internet	\$ _____	\$ _____
Postage/Delivery	\$ _____	\$ _____
Educational Materials	\$ _____	\$ _____
Printing	\$ _____	\$ _____
Office Supplies	\$ _____	\$ _____
TOTAL OTHER EXPENSES	\$ _____	\$ _____
ADMINISTRATIVE EXPENSES	\$ _____	\$ _____
SERVICE TERM CONTRACT TOTAL		

Service Term (2019-2021)

Respondent Name: _____

Respondent Mailing Address: _____

City, State, Zip: _____

Telephone: () _____ **Fax Number:** () _____

Email Address: _____

Federal Employer Identification Number (FEID): _____

BY AFFIXING MY SIGNATURE ON THIS REPLY, I HEREBY STATE THAT I HAVE READ THE ENTIRE ITN TERMS, CONDITIONS, PROVISIONS AND SPECIFICATIONS AND ALL ITS ATTACHMENTS, INCLUDING THE REFERENCED PUR 1000 AND PUR 1001. I hereby certify that my company, its employees, and its principals agree to abide to all of the terms, conditions, provisions and specifications during the competitive solicitation and any resulting contract including those contained in the Standard Contract.

Signature of Authorized Representative: _____

Printed (Typed) Name and Title: _____

*An authorized representative is an officer of the respondent's organization who has legal authority to bind the organization to the provisions of the applications. This usually is the President, Chairman of the Board, or owner of the entity. A document establishing delegated authority must be included with the Application if signed by other than the authorized representative.

9.3 Budget Narrative

At the applicant's discretion. Should include the contract budget period, salaries for staff involved directly with the contract, contract amount, salary percentage allocated to the contract per staff member, administrative expenses, indirect and direct expenses, and any itemized fringe expenses.

9.4 Personnel Form

Should include any personnel working on the grant, the approximate number of hours per week they will work on the grant over the duration of the funding period, and their role including job duties in relation to the grant.

9.5 Florida Department of Health Standard Contract

The following form is for reference only and cannot be modified. Applicants are not required to submit this form with their application, but will be required to sign it prior to award.

CFDA No.
CSFA No.

**STATE OF FLORIDA
DEPARTMENT OF HEALTH
STANDARD CONTRACT**

Client Non-Client
 Multi-County

THIS CONTRACT is entered into between the State of Florida, Department of Health, hereinafter referred to as the "Department," and _____ hereinafter referred to as "Provider," and jointly referred to as the "parties."

THE PARTIES AGREE:

I. PROVIDER AGREES:

- A. To provide services in accordance with the terms specified in Attachment I.
- B. To the Following Governing Law

1. State of Florida Law: This contract is executed and entered into in the state of Florida, and will be construed, performed, and enforced in all respects in accordance with the laws, rules, and regulations of the state of Florida. Each party will perform its obligations in accordance with the terms and conditions of this contract.
2. Federal Law
 - a. If this contract contains federal funds, Provider must comply with the provisions of 2 C.F.R. part 200, appendix II, and other applicable regulations as specified in Attachment I.
 - b. If this contract includes federal funds that will be used for construction or repairs, Provider must comply with the provisions of the Copeland "Anti-Kickback" Act (18 U.S.C. section 874), as supplemented by Department of Labor regulations (29 C.F.R. part 3, "Contractors and Subcontractors on Public Building or Public Work Financed in Whole or in Part by Loans or Grants from the United States"). The act prohibits providers from inducing, by any means, any person employed in the construction, completion, or repair of public work, to give up any part of the compensation to which he or she is otherwise entitled. All suspected violations must be reported to the Department.
 - c. If this contract includes federal funds that will be used for the performance of experimental, developmental, or research work, Provider must comply with 37 C.F.R., part 401, "Rights to Inventions Made by Nonprofit Organizations and Small Business Firms under Governmental Grants, Contracts, and Cooperative Agreements."
 - d. If this contract contains federal funds and is over \$100,000, Provider must comply with all applicable standards, orders, or regulations of the Clean Air Act, as amended (42 U.S.C. chapter 85) and the Clean Water Act, as amended (33 U.S.C. chapter 26), Executive Order 11738, and Environmental Protection Agency regulations codified in Title 40 of the Code of Federal Regulations. Provider must report any violations of the above to the Department.
 - e. If this contract contains federal funding in excess of \$100,000, Provider must, prior to contract execution, complete the Certification Regarding Lobbying form, Attachment _____. If a Disclosure of Lobbying Activities form, Standard Form LLL, is required, it may be obtained from the Contract Manager. All disclosure forms as required by the Certification Regarding Lobbying form must be completed and returned to the Contract Manager.
 - f. Employment of unauthorized aliens is a violation of the Immigration and Naturalization Act, 8 U.S.C. section 1324a, and such violation will be cause for unilateral cancellation of this contract by the Department. Provider must use the U.S. Department of Homeland Security's E-Verify system, <https://e-verify.uscis.gov/emp>, to verify the employment eligibility of all new employees hired during the contract term by Provider. Provider must also include a requirement

in subcontracts that the subcontractor must use the E-Verify system to verify the employment eligibility of all new employees performing work or providing services under this contract who are hired by the subcontractor during the contract term. Providers meeting the terms and conditions of the E-Verify System are deemed to be in compliance with this provision.

- g. Provider must comply with President's Executive Order 11246, Equal Employment Opportunity (30 Fed. Reg. 12935), as amended by President's Executive Order 11375, (32 Fed. Reg. 14303), and as supplemented by regulations at 41 C.F.R. chapter 60.
- h. Provider must comply with the Pro-Children Act of 1994, 20 U.S.C. sections 6081-6084, which requires that smoking not be permitted in any portion of any indoor facility used for the provision of federally funded services including health, day care, early childhood development, education or library services on a routine or regular basis, to children up to age 18. Provider's failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and the imposition of an administrative compliance order on the responsible entity. Provider must include a similar provision in any subcontracts it enters under this contract.
- i. Health Insurance Portability and Accountability Act of 1996 (HIPAA): When applicable, Provider must comply with Federal Privacy and Security Regulations developed by the U.S. Department of Health and Human Services as specified in 45 C.F.R. parts 160 and 164 promulgated pursuant to HIPAA, Pub. L. No. 104-191, and the Health Information Technology for Economic and Clinical Health Act, Title XIII of Division A, Title IV of Division B, Pub. L. No 111-5, collectively referred to as "HIPAA."
- j. Provider is required to submit a W-9 to the Department of Financial Services (DFS) electronically prior to doing business with the state of Florida via the Vendor Website at <https://flvendor.myfloridacfo.com>. Any subsequent changes to Provider's W-9 must be made on this website; however, if Provider needs to change its Federal Employer Identification Number (FEID), it must contact the DFS Vendor Ombudsman Section at (850) 413-5519.
- k. If Provider is determined to be a subrecipient of federal funds, Provider will comply with the requirements of the American Recovery and Reinvestment Act and the Federal Funding Accountability and Transparency Act, by obtaining a DUNS (Data Universal Numbering System) number and registering with the federal Central Contractor Registry (CCR). No payments will be issued until Provider has submitted a valid DUNS number and evidence of registration (i.e., a printed copy of the completed CCR registration) in CCR to the Contract Manager. To obtain registration and instructions, visit <http://fedgov.dnb.com/webform> and www.ccr.gov.

C. Audits, Records (including electronic storage media), and Records Retention

- 1. To establish and maintain books, records, and documents in accordance with generally accepted accounting procedures and practices, which sufficiently and properly reflect all revenues and expenditures of funds provided by the Department under this contract.
- 2. To retain all client records, financial records, supporting documents, statistical records, and any other documents pertinent to this contract for a period of six years after termination of the contract, or if an audit has been initiated and audit findings have not been resolved at the end of six years, the records must be retained until resolution of the audit findings or any litigation which may be based on the terms of this contract.
- 3. Upon completion or termination of this contract and at the request of the Department, Provider will, at its expense, cooperate with the Department in the duplication and transfer of any said records or documents during the required retention period as specified in Section I, paragraph C.2., above.
- 4. Persons duly authorized by the Department and federal auditors, pursuant to 2 C.F.R. section 200.336, will have full access to and the right to examine any of Provider's records and documents related to this contract, regardless of the form in which kept, at all reasonable times for as long as records are retained.
- 5. To ensure these audit and record keeping requirements are included in all subcontracts and assignments.
- 6. If Provider is a recipient or subrecipient as specified in Attachment ____, Provider will perform the required financial and compliance audits in accordance with the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, 2 C.F.R. part 200, subpart F and section 215.97, Florida Statutes, as applicable and conform to the following requirements:
 - a. Documentation. To maintain separate accounting of revenues and expenditures of funds under this contract and each Catalog of State Financial Assistance (CSFA) or Catalog of Federal Domestic Assistance (CFDA) number identified on the attached Exhibit 1, in accordance with generally accepted accounting practices and procedures. Expenditures which support Provider's activities not solely authorized under this contract must be allocated in accordance with applicable laws, rules, and regulations and the allocation methodology must be documented and supported by competent evidence.
 - b. Provider must maintain sufficient documentation of all expenditures incurred (e.g., invoices, canceled checks, payroll detail, bank statements, etc.) under this contract which evidences that expenditures are:
 - 1) Allowable under the contract and applicable laws, rules, and regulations;
 - 2) Reasonable; and
 - 3) Necessary in order for Provider to fulfill its obligations under this contract.

All documentation required by this section is subject to review by the Department and the state of Florida Chief Financial Officer. Provider must timely comply with any requests for documentation.

- c. Annual Financial Report. Within 45 days from the end of each contract year, but no later than submission of the final invoice for that year, submit to the Department an annual financial report stating, by line item, all expenditures made as a direct result of services provided through this contract. Each report must include a statement signed by an individual with legal authority to bind Provider, certifying that these expenditures are true, accurate, and directly related to this contract.
 - d. To ensure that funding received under this contract in excess of expenditures is remitted to the Department within 45 days of the end of each contract year and the contract end date.
7. Public Records: Keep and maintain public records, as defined by Chapter 119, Florida Statutes that are required by the Department to perform the services required by the contract. Upon request from the Department's custodian of public records, provide the Department with a copy of the requested public records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed that provided in Chapter 119, Florida Statutes, or as otherwise provided by law. Ensure that public records that are exempt or that are confidential and exempt from public record disclosure are not disclosed, except as authorized by law for the duration of the contract term and following completion of the contract if Provider does not transfer the public records to the Department. Upon completion of the contract, transfer to the Department at no cost, all public records in possession of Provider or keep and maintain public records required by the Department to perform the contract services. If Provider transfers all public records to the Department upon completion of the contract, Provider will destroy any duplicate public records that are exempt or confidential and exempt. If Provider keeps and maintains public records upon completion of the contract, Provider will meet all applicable requirements for retaining public records. All records stored electronically must be provided to the Department, upon request of the Department's custodian of public records, in a format that is compatible with the information technology systems of the Department. The Department may unilaterally terminate this contract if Provider refuses to allow access to all public records made or maintained by Provider in conjunction with this contract, unless the records are exempt from section 24(a) of Art. I of the State Constitution and section 119.07(1), Florida Statutes.

If the Provider has questions regarding the application of Chapter 119, Florida Statutes, to the Provider's duty to provide public records relating to this contract, contact the custodian of public records at (850)245-4005, PublicRecordsRequest@flhealth.gov or 4052 Bald Cypress Way, Bin A02, Tallahassee, FL 32399.

8. Cooperation with Inspectors General: To the extent applicable, Provider acknowledges and understands it has a duty to and will cooperate with the inspector general in any investigation, audit, inspection, review, or hearing pursuant to section 20.055(5), Florida Statutes.
- D. Monitoring by the Department:** To permit persons duly authorized by the Department to inspect any records, papers, documents, facilities, goods, and services of Provider, which are relevant to this contract, and interview any clients or employees of Provider to assure the Department of satisfactory performance of the terms and conditions of this contract. Following the Department's monitoring, at its sole and exclusive direction, the Department may provide Provider with a written report or take other actions including the assessment of financial consequences pursuant to section 287.058(1)(h), Florida Statutes, and termination of this contract for cause.
- E. Indemnification**
- 1. Provider is liable for and will indemnify, defend, and hold harmless the Department and all of its officers, agents, and employees from all claims, suits, judgments, or damages, consequential or otherwise and including attorneys' fees and costs, arising out of any act, actions, neglect, or omissions by Provider, its agents, or employees during the performance or operation of this contract or any subsequent modifications thereof, whether direct or indirect, and whether to any person or tangible or intangible property.
 - 2. Provider's inability to evaluate liability or its evaluation of no liability will not excuse Provider's duty to defend and indemnify the Department within seven days after certified mail or courier delivery notice from the Department. Only adjudication or judgment after highest appeal is exhausted specifically finding Provider not liable will excuse performance of this provision. Provider will pay all costs and fees related to this obligation and its enforcement by the Department. The Department's failure to notify Provider of a claim will not release Provider of the above duty to defend. **NOTE: This section, I.E, Indemnification, is not applicable to contracts executed between state agencies or subdivisions, as defined in section 768.28, Florida Statutes.**
- F. Insurance:** To provide adequate liability insurance coverage on a comprehensive basis and to hold such liability insurance at all times during the existence of this contract and any renewal(s) and extension(s) of it. Upon execution of this contract, unless it is a state agency or subdivision as defined in section 768.28, Florida Statutes, Provider accepts full responsibility for identifying and determining the type(s) and extent of liability insurance necessary to provide reasonable financial protections for Provider and the clients to be served under this contract. The limits of coverage under each policy maintained by Provider

do not limit Provider's liability and obligations under this contract. Upon the execution of this contract, Provider must furnish the Department written verification supporting both the determination and existence of such insurance coverage. Such coverage may be provided by a self-insurance program established and operating under the laws of the state of Florida. The Department reserves the right to require additional insurance as specified in Attachment I.

- G. Safeguarding Information:** Not to use or disclose any information concerning a recipient of services under this contract for any purpose not in conformity with state and federal law except upon written consent of the recipient, or the responsible parent or guardian when authorized by law.
- H. Assignments and Subcontracts**
1. To neither assign the responsibility of this contract to another party nor subcontract for any of the work contemplated under this contract without prior written approval of the Department, which will not be unreasonably withheld. Any sub-license, assignment, or transfer otherwise occurring will be null and void. In the event the use of subcontracts is allowed, Provider will remain responsible for all work performed and all expenses incurred in connection with the contract. In addition, this contract will bind the successors, assigns, and legal representatives of Provider and of any legal entity that succeeds to the obligations of the Department.
 2. Provider will be responsible for all work performed and all expenses incurred for this contract. If the Department permits Provider to subcontract all or part of the work contemplated under this contract, including entering into subcontracts with vendors for services or commodities, the Department will not be liable to the subcontractor for any expenses or liabilities incurred under the subcontract and Provider will be solely liable to the subcontractor for all expenses and liabilities incurred under the subcontract. If the Department permits Provider to subcontract, such permission will be indicated in Attachment I.
 3. The Department will at all times be entitled to assign or transfer, in whole or part, its rights, duties, or obligations under this contract to another governmental agency in the state of Florida, upon prior written notice to Provider.
 4. Unless otherwise stated in the contract between Provider and subcontractor, payments made by Provider to the subcontractor must be within seven working days after receipt of full or partial payments from the Department in accordance with section 287.0585, Florida Statutes. Failure to pay within seven working days will result in a penalty charged against Provider to be paid by Provider to the subcontractor in the amount of one-half of one percent of the amount due per day from the expiration of the period allowed herein for payment. The penalty will be in addition to actual payments owed and will not exceed 15 percent of the outstanding balance due.
- I. Return of Funds:** Return to the Department any overpayments due to unearned funds or funds disallowed and any interest attributable to such funds pursuant to the terms of this contract that were paid to Provider by the Department. In the event that Provider or its independent auditor discovers that overpayment has been made, Provider will repay the overpayment within 40 calendar days without prior notification from the Department. In the event that the Department first discovers an overpayment has been made, the Department will notify Provider in writing of such a finding. Should repayment not be made in the time specified by the Department, Provider will pay interest of one percent per month compounded on the outstanding balance after 40 calendar days after the date of notification or discovery.
- J. Transportation Disadvantaged:** If clients are to be transported under this contract, Provider must comply with the provisions of Chapter 427, Florida Statutes, and Florida Administrative Code Chapter 41-2. Provider must submit the reports required pursuant to the Department's Internal Operating Procedure (IOP) 56-58-15, Transportation Disadvantaged Procedure.
- K. Purchasing**
1. Prison Rehabilitative Industries and Diversified Enterprises, Inc. (PRIDE): It is expressly understood and agreed that any articles which are the subject of, or required to carry out, this contract shall be purchased from the corporation identified under Chapter 946, Florida Statutes, in the same manner and under the same procedures set forth in section 946.515(2) and (4), Florida Statutes; and for purposes of this contract the person, firm, or other business entity carrying out the provisions of this contract (Provider) shall be deemed to be substituted for this agency (the Department) insofar as dealings with such corporation are concerned. This clause is not applicable to subcontractors unless otherwise required by law. An abbreviated list of products and services available from PRIDE may be obtained by contacting PRIDE at 1-800-643-8459.
 2. Procurement of Materials with Recycled Content: Any products or materials which are the subject of, or are required to carry out this contract will be procured in accordance with the provisions of sections 287.045 and 403.7065, Florida Statutes.
 3. MyFloridaMarketPlace Vendor Registration: Each vendor doing business with the state of Florida for the sale of commodities or contractual services as defined in section 287.012, Florida Statutes, must register in the MyFloridaMarketPlace system, unless exempted under Florida Administrative Code Rule 60A-1.030(3).
 4. MyFloridaMarketPlace Transaction Fee:
 - a. The state of Florida, through the Department of Management Services, has instituted MyFloridaMarketPlace, a statewide procurement system. Pursuant to section 287.057(22), Florida Statutes, all payments will be assessed a Transaction Fee of one percent, which Provider will pay to the State.
 - b. For payments within the State accounting system (FLAIR or its successor), the Transaction Fee will, when possible, be automatically deducted from payments to the vendor. If automatic deduction is not possible, Provider will pay the

Transaction Fee pursuant to Florida Administrative Code Rule 60A-1.031(2). By submission of these reports and corresponding payments, vendor certifies their correctness. All such reports and payments will be subject to audit by the State or its designee.

- c. Vendor will receive a credit for any Transaction Fee paid by Vendor for the purchase of any item, if such item is returned to Vendor through no fault, act, or omission of Vendor. Notwithstanding the foregoing, a Transaction Fee is non-refundable when an item is rejected or returned, or declined, due to the vendor's failure to perform or comply with specifications or requirements of this contract. Failure to comply with these requirements will constitute grounds for declaring the vendor in default and recovering procurement costs from the vendor in addition to all outstanding fees. Providers delinquent in paying transaction fees may be excluded from conducting future business with the State.

L. Civil Rights Requirements: Civil Rights Certification: Provider must comply with applicable provisions of the Department's publication titled, "Methods of Administration, Equal Opportunity in Service Delivery."

M. Independent Capacity of the Provider

1. Provider is an independent contractor and is solely liable for the performance of all tasks and deliverables contemplated by this contract.
2. Except where Provider is a state agency, Provider, its officers, agents, employees, subcontractors, or assignees, in performance of this contract, will act in the capacity of an independent contractor and not as an officer, employee, or agent of the state of Florida. Provider will not represent to others that it has the authority to bind the Department unless specifically authorized to do so.
3. Except where Provider is a state agency, Provider, its officers, agents, employees, subcontractors, or assignees are not entitled to state retirement or state leave benefits, or to any other compensation of state employment as a result of performing the duties and obligations of this contract.
4. Provider agrees to take such actions as may be necessary to ensure that each subcontractor of Provider understand they are independent contractor and will not be considered or permitted to be an agent, servant, joint venturer, or partner of the state of Florida.
5. Unless justified by Provider and agreed to by the Department in Attachment I, the Department will not furnish services of support (e.g., office space, office supplies, telephone service, secretarial, or clerical support) to Provider, or its subcontractor or assignee.
6. All deductions for social security, withholding taxes, income taxes, contributions to unemployment compensation funds, and all necessary insurance for Provider, Provider's officers, employees, agents, subcontractors, or assignees will be the responsibility of Provider.

N. Sponsorship: As required by section 286.25, Florida Statutes, if Provider is a non-governmental organization which sponsors a program financed wholly or in part by state funds, including any funds obtained through this contract, it will, in publicizing, advertising, or describing the sponsorship of the program, state: "*Sponsored by (Provider's name) and the State of Florida, Department of Health.*" If the sponsorship reference is in written material, the words "*State of Florida, Department of Health*" will appear in at least the same size letters or type as Provider's name.

O. Final Invoice: To submit the final invoice for payment to the Department no more than _____ days after the contract ends or is terminated. If Provider fails to do so, all right to payment is forfeited and the Department will not honor any requests submitted after the aforesaid time period. Any payment due under the terms of this contract may be withheld until all deliverables and any necessary adjustments have been approved by the Department.

P. Use of Funds for Lobbying Prohibited: Comply with the provisions of sections 11.062 and 216.347, Florida Statutes, which prohibit the expenditure of contract funds for the purpose of lobbying the Legislature, judicial branch, or a state agency.

Q. Public Entity Crime, Discriminatory Vendor, and Scrutinized Companies

1. Pursuant to section 287.133, Florida Statutes, the following restrictions are placed on the ability of persons convicted of public entity crimes to transact business with the Department: When a person or affiliate has been placed on the convicted vendor list following a conviction for a public entity crime, he or she may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in section 287.017, Florida Statutes, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted vendor list.
2. Pursuant to section 287.134, Florida Statutes, the following restrictions are placed on the ability of persons convicted of discrimination to transact business with the Department: When a person or affiliate has been placed on the discriminatory vendor list following a conviction for discrimination, he or she may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in section 287.017, Florida Statutes, for CATEGORY TWO for a period of 36 months from the date of being placed on the discriminatory vendor list.
3. Provider must comply with the provisions of section 287.135, Florida Statutes as follows:

a. If Provider is found to have submitted a false certification as provided under section 287.135(5), Florida Statutes, that it is not on the *Scrutinized Companies with Activities in Sudan List*, the *Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List*, or that has been engaged in business operations in Cuba or Syria, this contract may be terminated at the option of the Department.

b. If Provider is found to have been placed on the Scrutinized companies that Boycott Israel List or is engaged in a boycott of Israel this contract may be terminated at the option of the Department.

R. Patents, Copyrights, and Royalties

1. Any inventions or discoveries developed in the course of or as a result of services performed under this contract which are patentable pursuant to 35 U.S.C. section 101, are the sole property of the state of Florida. Provider must inform the Department of any inventions or discoveries developed in connection with this contract, and will be referred to the Department of State for a determination on whether patent protection will be sought for the invention or discovery. The state of Florida will be the sole owner of all patents resulting from any invention or discovery made in connection with this contract.
2. Provider must notify the Department of State of any books, manuals, films, or other copyrightable works developed in connection with this contract. Any and all copyrights accruing under or in connection with the performance under this contract are the sole property of the state of Florida.
3. Provider, without exception, will indemnify and save harmless the state of Florida and its employees from liability of any nature or kind, including cost and expenses for or on account of any copyrighted, patented, or unpatented invention, process, or article manufactured by Provider. Provider has no liability when such claim is solely and exclusively due to the Department of State's alteration of the article. The state of Florida will provide prompt written notification of claim of copyright or patent infringement. Further, if such claim is made or is pending, Provider may, at its option and expense, procure for the Department of State, the right to continue use of, replace, or modify the article to render it non-infringing. If Provider uses any design, device, or materials covered by letters, patent, or copyright, it is mutually agreed and understood without exception that the bid prices will include all royalties or cost arising from the use of such design, device, or materials in any way involved in the work.

S. Construction or Renovation of Facilities Using State Funds: Any state funds provided for the purchase of or improvements to real property are contingent upon Provider granting to the state a security interest in the property at least to the amount of the state funds provided for at least five years from the date of purchase or the completion of the improvements or as further required by law. As a condition of a receipt of state funding for this purpose, Provider agrees that, if it disposes of the property before the state's interest is vacated, Provider will refund the proportionate share of the state's initial investment, as adjusted by depreciation or appreciation.

T. Electronic Fund Transfer: Provider agrees to enroll in Electronic Fund Transfer (EFT) provided by DFS. Questions should be directed to DFS's EFT Section at (850) 410-9466. The previous sentence is for notice purposes only. Copies of the authorization form and sample bank letter are available from DFS.

U. Information Security: Maintain confidentiality of all data, files, and records including client records related to the services provided pursuant to this contract and will comply with state and federal laws, including, but not limited to, sections 381.004, 384.29, 392.65, and 456.057, Florida Statutes.

V. Venue: Venue for any legal actions arising from this contract will be in Leon County, Florida, unless the contract is entered into on by one of the Department's county health department, in which case, venue for any legal actions will be the pertinent county.

II. METHOD OF PAYMENT

A. Contract Amount: The Department agrees to pay Provider for completion of the deliverables as specified in Attachment I, in an amount not to exceed____, subject to the availability of funds. The state of Florida's performance and obligation to pay under this contract is contingent upon an annual appropriation by the Legislature. The costs of services paid under any other contract or from any other source are not eligible for reimbursement under this contract.

B. Contract Payment:

1. Provider must submit bills for fees or other compensation for services or expenses in sufficient detail for a proper pre-audit and post-audit thereof.
2. Where reimbursement of travel expenses are allowable as specified in Attachment I, bills for any travel expenses must be submitted in accordance with section 112.061, Florida Statutes. The Department may, if specified in Attachment I, establish rates lower than the maximum provided in section 112.061, Florida Statutes.
3. Pursuant to section 215.422, Florida Statutes, the Department has five working days to inspect and approve goods and services, unless this contract specifies otherwise. With the exception of payments to health care providers for hospital, medical, or other health care services, if payment is not available within 40 days, measured from the latter of the date the invoice is received or the goods or services are received, inspected and approved, a separate interest penalty set by the State of Florida's Chief Financial Officer pursuant to section 55.03, Florida Statutes, will be due and payable in addition to the invoice amount. To obtain the applicable interest rate, contact the Department's fiscal office or contract administrator. Payments to health care providers for hospitals, medical, or other health care services, will be made not more than 35 days from the date eligibility for payment is determined, at the daily interest rate of 0.03333 percent. Invoices returned to Provider due to preparation errors will result in a payment delay. Interest penalties less than one dollar will not be enforced unless Provider

requests payment. Invoice payment requirements do not start until a properly completed invoice is provided to the Department.

- C. **Vendor Ombudsman:** A Vendor Ombudsman has been established within DFS whose duties include acting as an advocate for providers who may be experiencing problems in obtaining timely payment from a state agency. The Vendor Ombudsman may be contacted at (850) 413-5516 or by calling the DFS Consumer Hotline at 1-(800)-342-2762.

III. PROVIDER CONTRACT TERM

- A. **Effective and Ending Dates:** This contract will begin on _____ or on the date on which the contract has been signed by both parties, whichever is later. It will end on_____.

- B. **Termination**

- 1. Termination at Will: This contract may be terminated by either party upon no less than 30 calendar days’ written notice to the other party, without cause, unless a lesser time is mutually agreed upon in writing by both parties. The notice must be delivered by certified mail, return receipt requested, or in person with proof of delivery.
- 2. Termination Because of Lack of Funds: In the event funds to finance this contract become unavailable, the Department may terminate the contract upon no less than 24 hours’ written notice to Provider. The notice must be delivered by certified mail, return receipt requested, or in person with proof of delivery. The Department will be the final authority as to the availability and adequacy of funds.
- 3. Termination for Breach: This contract may be terminated for non-performance upon no less than 24 hours’ written notice to Provider. If applicable, the Department will employ the default provisions in Florida Administrative Code Rule 60A-1.006(3). Waiver of breach of any provisions of this contract will not be deemed to be a waiver of any other breach and will not be construed to be a modification of the terms of this contract. The provisions herein do not limit the Department’s right to remedies at law or in equity.
- 4. In the event this contract is terminated, Provider will be compensated for any deliverables completed prior to the Department’s notification to Provider of contract termination.

- C. **Renegotiation or Modification:** Modifications of provisions of this contract will only be valid when they have been reduced to writing and duly signed by both parties. The rate of payment and dollar amount may be adjusted retroactively to reflect price level increases and changes in the rate of payment when these have been established through the appropriations process and subsequently identified in the Department’s operating budget.

- D. **Contract Representatives Contact Information:**

- 1. The name, mailing address, and telephone number of Provider’s official payee to whom the payment will be made is:

- 3. The name, address, and telephone number of the Department’s Contract Manager is:

- 2. The name of the contact person and street address where Provider’s financial and administrative records are maintained is:

- 4. The name, address, and telephone number of Provider’s representative responsible for administration of the program under this contract is:

- 5. Provide written notice to the other party of any changes in the above contract representative’s contact information. Any such changes will not require a formal amendment to this contract.

- E. **All Terms and Conditions Included:** This contract and its attachments and exhibits as referenced, _____ contain all the terms and conditions agreed upon by the parties. There are no provisions, terms, conditions, or obligations other than those contained herein, and this contract will supersede all previous communications, representations, or agreements, either verbal or written between the parties. If any term or provision of this contract is found to be illegal or unenforceable, the remainder of the contract will remain in full force and effect and such term or provision will be stricken.

I have read the above contract and understand each section and paragraph.

IN WITNESS THEREOF, the parties hereto have caused this _____ page contract to be executed by their undersigned, duly authorized, officials.

PROVIDER: _____

SIGNATURE: _____

PRINT/TYPE NAME: _____

TITLE: _____

DATE: _____

STATE AGENCY 29-DIGIT FLAIR CODE: _____

FEID# (OR SSN): _____

PROVIDER FISCAL YEAR ENDING DATE: _____

STATE OF FLORIDA, DEPARTMENT OF HEALTH

SIGNATURE: _____

PRINT/TYPE NAME: _____

TITLE: _____

DATE: _____

**BY SIGNING THIS CONTRACT, THE ABOVE
ATTESTS THERE IS EVIDENCE IN THE
CONTRACT FILE
DEMONSTRATING THIS CONTRACT WAS
REVIEWED BY THE DEPARTMENT'S OFFICE OF
THE GENERAL COUNSEL.**

ATTACHMENT A

The following form is for reference only. Applicants are not required to submit this forms with their application.

AUDIT REQUIREMENTS FOR AWARDS OF STATE AND FEDERAL FINANCIAL ASSISTANCE

NOTICE: A Notice of Rule Development for amendments to Rule Chapter 69I-5, Florida Administrative Code (F.A.C.), State Financial Assistance, has been published in the Florida Administrative Register. An updated version of Form DFS-A2-CL will be incorporated in the final rule.

The administration of resources awarded by the Department of ABC (*replace "Department of ABC" with the appropriate reference to the contracting state awarding agency*) to the recipient (*or other appropriate reference to the recipient*) may be subject to audits and/or monitoring by the Department of ABC, as described in this section.

MONITORING

In addition to reviews of audits conducted in accordance with 2 CFR 200, Subpart F - Audit Requirements, and section 215.97, Florida Statutes (F.S.), as revised (see AUDITS below), monitoring procedures may include, but not be limited to, on-site visits by Department of ABC staff, limited scope audits as defined by 2 CFR §200.425, or other procedures. By entering into this agreement, the recipient agrees to comply and cooperate with any monitoring procedures or processes deemed appropriate by the Department of ABC. In the event the Department of ABC determines that a limited scope audit of the recipient is appropriate, the recipient agrees to comply with any additional instructions provided by Department of ABC staff to the recipient regarding such audit. The recipient further agrees to comply and cooperate with any inspections, reviews, investigations, or audits deemed necessary by the Chief Financial Officer (CFO) or Auditor General.

AUDITS

Part I: Federally Funded

This part is applicable if the recipient is a state or local government or a nonprofit organization as defined in 2 CFR §200.90, §200.64, and §200.70.

1. A recipient that expends \$750,000 or more in federal awards in its fiscal year must have a single or program-specific audit conducted in accordance with the provisions of 2 CFR 200, Subpart F - Audit Requirements. EXHIBIT 1 to this form lists the federal resources awarded through the Department of ABC by this agreement. In determining the federal awards expended in its fiscal year, the recipient shall consider all sources of federal awards, including federal resources received from the Department of ABC. The determination of amounts of federal awards expended should be in accordance with the guidelines established in 2 CFR §§200.502-503. An audit of the recipient conducted by the Auditor General in accordance with the provisions of 2 CFR §200.514 will meet the requirements of this Part.
2. For the audit requirements addressed in Part I, paragraph 1, the recipient shall fulfill the requirements relative to auditee responsibilities as provided in 2 CFR §§200.508-512.
3. A recipient that expends less than \$750,000 in federal awards in its fiscal year is not required to have an audit conducted in accordance with the provisions of 2 CFR 200, Subpart F - Audit Requirements. If the recipient expends less than \$750,000 in federal awards in its fiscal year and elects to have an audit conducted in accordance with the provisions of 2 CFR 200, Subpart F - Audit Requirements, the cost of the audit must be paid from non-federal resources (i.e., the cost of such an audit must be paid from recipient resources obtained from other than federal entities).

Note: The state awarding agency should address other miscellaneous matters affecting Part I audits, such as websites with information that would facilitate the recipient's compliance.

Part II: State Funded

Note: This part is applicable if the recipient is a nonstate entity as defined by section 215.97(2), F.S.

1. In the event that the recipient expends a total amount of state financial assistance equal to or in excess of \$750,000 in any fiscal year of such recipient (for fiscal years ending June 30, 2017, or thereafter), the recipient must have a state single or project-specific audit for such fiscal year in accordance with section 215.97, F.S.; applicable rules of the Department of Financial Services; and Chapters 10.550 (local governmental entities) and 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General. EXHIBIT 1 to this form lists the state financial assistance awarded through the Department of ABC by this agreement. In determining the state financial assistance expended in its fiscal year, the recipient shall consider all sources of state financial assistance, including state financial assistance received from the Department of ABC, other state agencies, and other nonstate entities. State financial assistance does not include federal direct or pass-through awards and resources received by a nonstate entity for federal program matching requirements.
2. For the audit requirements addressed in Part II, paragraph 1, the recipient shall ensure that the audit complies with the requirements of section 215.97(8), F.S. This includes submission of a financial reporting package as defined by section 215.97(2), F.S., and Chapters 10.550 (local governmental entities) and 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General.
3. If the recipient expends less than \$750,000 in state financial assistance in its fiscal year (for fiscal years ending June 30, 2017, or thereafter), an audit conducted in accordance with the provisions of section 215.97, F.S., is not required. If the recipient expends less than \$750,000 in state financial assistance in its fiscal year and elects to have an audit conducted in accordance with the provisions of section 215.97, F.S., the cost of the audit must be paid from the nonstate entity's resources (i.e., the cost of such an audit must be paid from the recipient's resources obtained from other than state entities).

Note: The state awarding agency should address other miscellaneous matters affecting Part II audits, such as identifying websites with information that would facilitate the recipient's compliance.

Part III: Other Audit Requirements

Note: This Part should be used to specify any additional audit requirements imposed by the state awarding entity that are solely a matter of that state awarding entity's policy (i.e., the audit is not required by federal or state laws and is not in conflict with other federal or state audit requirements). Pursuant to section 215.97(8), F.S., state agencies may conduct or arrange for audits of state financial assistance that are in addition to audits conducted in accordance with section 215.97, F.S. In such an event, the state awarding agency must arrange for funding the full cost of such additional audits.

Part IV: Report Submission

1. Copies of reporting packages for audits conducted in accordance with 2 CFR 200, Subpart F - Audit Requirements, and required by Part I of this form shall be submitted, when required by 2 CFR §200.512, by or on behalf of the recipient directly to the Federal Audit Clearinghouse (FAC) as provided in 2 CFR §200.36 and §200.512.

The FAC's website provides a data entry system and required forms for submitting the single audit reporting package. Updates to the location of the FAC and data entry system may be found at the OMB website.

2. Copies of financial reporting packages required by Part II of this form shall be submitted by or on behalf of the recipient directly to each of the following:
 - a. The Department of ABC at each of the following addresses:
Department address(es) (i.e., office(s) responsible for program oversight)

- b. The Auditor General's Office at the following address:

Auditor General
Local Government Audits/342
Claude Pepper Building, Room 401
111 West Madison Street
Tallahassee, Florida 32399-1450

The Auditor General's website (<https://flauditor.gov/>) provides instructions for filing an electronic copy of a financial reporting package.

3. *(The state awarding agency should use the following language, if applicable.)* Copies of reports or the management letter required by Part III of this form shall be submitted by or on behalf of the recipient directly to:

The Department of ABC at each of the following addresses:

Department address(es) (i.e., office(s) responsible for program oversight)

4. Any reports, management letters, or other information required to be submitted to the Department of ABC pursuant to this agreement shall be submitted timely in accordance with 2 CFR §200.512, section 215.97, F.S., and Chapters 10.550 (local governmental entities) and 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General, as applicable.
5. Recipients, when submitting financial reporting packages to the Department of ABC for audits done in accordance with 2 CFR 200, Subpart F - Audit Requirements, or Chapters 10.550 (local governmental entities) and 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General, should indicate the date that the reporting package was delivered to the recipient in correspondence accompanying the reporting package.

Part V: Record Retention

The recipient shall retain sufficient records demonstrating its compliance with the terms of the award(s) and this agreement for a period of years (*specify appropriate number of years, should be at least five years*) from the date the audit report is issued, and shall allow the Department of ABC, or its designee, the CFO, or Auditor General access to such records upon request. The recipient shall ensure that audit working papers are made available to the Department of ABC, or its designee, the CFO, or Auditor General upon request for a period of (*specify appropriate number of years, should be at least three years*) years from the date the audit report is issued, unless extended in writing by the Department of ABC.

Note: Records need to be retained for at least five years to comply with record retention requirements related to original vouchers as prescribed by the Department of State, Division of Library and Information Services, Bureau of Archives and Records Management.

EXHIBIT 1

Federal Resources Awarded to the Recipient Pursuant to this Agreement Consist of the Following:

Note: If the resources awarded to the recipient represent more than one federal program, provide the same information shown below for each federal program and show total federal resources awarded.

1. Federal Program A:

List federal agency, Catalog of Federal Domestic Assistance title and number, and \$ (amount).

2. Federal Program B:

List federal agency, Catalog of Federal Domestic Assistance title and number, and \$ (amount).

Compliance Requirements Applicable to the Federal Resources Awarded Pursuant to this Agreement are as Follows:

Note: If the resources awarded to the recipient represent more than one federal program, list applicable compliance requirements for each federal program in the same manner as shown below.

1. Federal Program A:

List applicable compliance requirements as follows:

- a. *First applicable compliance requirement (e.g., what services or purposes resources must be used for).*
- b. *Second applicable compliance requirement (e.g., eligibility requirements for recipients of the resources).*
- c. *Etc.*

2. Federal Program B:

List applicable compliance requirements as follows:

- a. *First applicable compliance requirement (e.g., what services or purposes resources must be used for).*
- b. *Second applicable compliance requirement (e.g., eligibility requirements for recipients of the resources).*
- c. *Etc.*

Note: Instead of listing the specific compliance requirements as shown above, the state awarding agency may elect to use language that requires the recipient to comply with the requirements of applicable provisions of specific laws, rules, regulations, etc. For example, for Federal Program A, the language may state that the recipient must comply with specific laws, rules, regulations, etc., that pertains to how the awarded resources must be used or how eligibility determinations are to be made. The state awarding agency, if practical, may want to attach a copy of the specific laws, rules, regulations, etc., referred to.

State Resources Awarded to the Recipient Pursuant to this Agreement Consist of the Following:

Matching Resources for Federal Programs:

Note: If the resources awarded to the recipient for matching represent more than one federal program, provide the same information shown below for each federal program and show total state resources awarded for matching.

1. Federal Program A:

List federal agency, Catalog of Federal Domestic Assistance title and number, and \$ (amount).

2. Federal Program B:

List federal agency, Catalog of Federal Domestic Assistance title and number, and \$ (amount).

Subject to Section 215.97, F.S.:

Note: If the resources awarded to the recipient represent more than one state project, provide the same information shown below for each state project and show total state financial assistance awarded that is subject to section 215.97, F.S.

1. State Project A:

List state awarding agency, Catalog of State Financial Assistance title and number, and \$ (amount).

2. State Project B:

List state awarding agency, Catalog of State Financial Assistance title and number, and \$ (amount).

Compliance Requirements Applicable to State Resources Awarded Pursuant to this Agreement Are as Follows:

Note: List applicable compliance requirements in the same manner as illustrated above for federal resources. For matching resources provided by the Department of ABC for federal programs, the requirements might be similar to the requirements for the applicable federal programs. Also, to the extent that different requirements pertain to different amounts of the non-federal resources, there may be more than one grouping (i.e., 1, 2, 3, etc.) listed under this category.

Note: 2 CFR §200.513 and section 215.97(5), F.S., require that the information about federal programs and state projects included in EXHIBIT 1 be provided to the recipient.

This document may be obtained from the Department of Financial Services' website (<https://apps.fldfs.com/fsaa>). For questions regarding Form DFS-A2-CL, contact your FSAA state agency liaison or the Department of Financial Services, Bureau of Auditing, at FSAA@MyFloridaCFO.com or (850) 413-3060.

End of Text

EXHIBIT 2

PART I: AUDIT RELATIONSHIP DETERMINATION

Providers who receive state or federal resources may or may not be subject to the audit requirements of 2 C.F.R. § 200.500, and/or section 215.97, Florida Statutes, Providers who are determined to be recipients or subrecipients of federal awards and/or state financial assistance may be subject to the audit requirements if the audit threshold requirements set forth in Part I and/or Part II of Exhibit 1 is met. Providers who have been determined to be vendors are not subject to the audit requirements of 2 C.F.R. § 200.501, and/or section 215.97, Florida Statutes. Providers who are "higher education entities" as defined in Section 215.97(2)(h), Florida Statutes, and are recipients or subrecipients of state financial assistance, are also exempt from the audit requirements of Section 215.97(2)(a), Florida Statutes. Regardless of whether the audit requirements are met, providers who have been determined to be recipients or subrecipients of Federal awards and/or state financial assistance must comply with applicable programmatic and fiscal compliance requirements.

For the purpose of an audit, the Provider has been determined to be:

- _____ Vendor not subject to 2 C.F.R. § 200.501 and/or section 215.97, Florida Statutes
- _____ Recipient/subrecipient subject to 2 C.F.R. § 200.501 and/or section 215.97, Florida Statutes
- _____ Exempt organization not subject to 2 C.F.R. § 200.501; For Federal awards for-profit subrecipient organizations are exempt as specified in 2 C.F.R. § 200.501(h).
- _____ Exempt organization not subject to section 215.97, Florida Statutes, for state financial assistance projects, public universities, community colleges, district school boards, branches of state (Florida) government, and charter schools are exempt. Exempt organizations must comply with all compliance requirements set forth within the contract.

NOTE: If Provider is determined to be a recipient/subrecipient of federal and or state financial assistance and has been approved by the department to subcontract, it must comply with section 215.97(7), Florida Statutes, and Florida Administrative Code Rule 69I-.5006, [state financial assistance] and 2 C.F.R. § 200.330 [federal awards].

PART II: FISCAL COMPLIANCE REQUIREMENTS

FEDERAL AWARDS OR STATE MATCHING FUNDS ON FEDERAL AWARDS. Providers who receive Federal awards, state maintenance of effort funds, or state matching funds on Federal awards and who are determined to be a subrecipient must comply with the following fiscal laws, rules and regulations:

1. 2 C.F.R. Part 200- Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards
2. Reference Guide for State Expenditures
3. Other fiscal requirements set forth in program laws, rules, and regulations

*Some Federal programs may be exempted from compliance with the Cost Principles Circulars as noted in the 2 C.F.R. § 200.401(5) (c).

**For funding passed through U.S. Health and Human Services, 45 C.F.R. Part 92; for funding passed through U.S. Department of Education, 34 C.F.R. Part 80.

STATE FINANCIAL ASSISTANCE. Providers who receive state financial assistance and who are determined to be a recipient/subrecipient must comply with the following fiscal laws, rules and regulations:

1. Section 215.97, Florida Statutes
2. Florida Administrative Code Chapter 69I-5,
3. State Projects Compliance Supplement
4. Reference Guide for State Expenditures
5. Other fiscal requirements set forth in program laws, rules and regulations

Additional guidance may be obtained at [Audit Guidance](#). *Enumeration of laws, rules and regulations herein is not exhaustive or exclusive. Fund recipients will be held to applicable legal requirements whether or not outlined herein.

End of Text

EXHIBIT 3 INSTRUCTIONS FOR ELECTRONIC SUBMISSION OF SINGLE AUDIT REPORTS

Single Audit reporting packages (“SARP”) must be submitted to the Department in an electronic format. This change will eliminate the need to submit multiple copies of the reporting package to the Contract Managers and various sections within the Department and will result in efficiencies and cost savings to Provider and the Department. Upon receipt, the SARP’s will be posted to a secure server and accessible to Department staff.

The electronic copy of the SARP should:

- Be in a Portable Document Format (PDF).
- Include the appropriate letterhead and signatures in the reports and management letters.
 - Be a single document. However, if the financial audit is issued separately from the Single Audit reports, the financial audit reporting package may be submitted as a single document and the Single Audit reports may be submitted as a single document. Documents which exceed 8 megabytes (MB) may be stored on a CD and mailed to: Bureau of Finance & Accounting, Attention: Single Audit Review, 4052 Bald Cypress Way, Bin B01 (HAFA), Tallahassee, FL 32399-1729.
- Be an exact copy of the final, signed SARP provided by the Independent Audit firm.
- Not have security settings applied to the electronic file.
- Be named using the following convention: [fiscal year] [name of the audited entity exactly as stated within the audit report].pdf. For example, if the SARP is for the 2016-17 fiscal year for the City of Gainesville, the document should be entitled 2016 City of Gainesville.pdf.
- Be accompanied by the attached “Single Audit Data Collection Form.” This document is necessary to ensure that communications related to SARP issues are directed to the appropriate individual(s) and that compliance with Single Audit requirements is properly captured.

Questions regarding electronic submissions may be submitted via e-mail to SingleAudits@flhealth.gov or by telephone to the Single Audit Review Section at (850) 245-4185.

Exhibit 4

Single Audit Data Collection Form

GENERAL INFORMATION

1. Fiscal period ending date for the Single Audit.

Month	Day	Year
/	/	

2. Auditee Identification Number

a. Primary Employer Identification Number (EIN)

		--							
--	--	----	--	--	--	--	--	--	--

b. Are multiple EINs covered in this report Yes No
 c. If "yes", complete No. 3.

3. ADDITIONAL ENTITIES COVERED IN THIS REPORT

Employer Identification #

		--									
		--									
		--									
		--									

Name of Entity

4. AUDITEE INFORMATION

a. Auditee name:	
b. Auditee address (number and street)	
City	
State	Zip Code
c. Auditee contact	
Name:	
Title:	
d. Auditee contact telephone	
()	-
e. Auditee contact FAX	
()	-
f. Auditee contact E-mail	

5. PRIMARY AUDITOR INFORMATION

a. Primary auditor name:	
b. Primary auditor address (number and street)	
City	
State	Zip Code
c. Primary auditor contact	
Name:	
Title:	
d. Primary auditor contact telephone	
()	-
e. Primary auditor E-mail	
()	-
f. Audit Firm License Number	

6. AUDITEE CERTIFICATION STATEMENT – This is to certify that, to the best of my knowledge and belief, the auditee has: (1) engaged an auditor to perform an audit in accordance with the provisions of 2 C.F.R. § 200. 512 and/or section 215.97, Florida Statutes, for the period described in Item 1; (2) the auditor has completed such audit and presented a signed audit report which states that the audit was conducted in accordance with the aforementioned Circular and/or Statute; (3) the attached audit is a true and accurate copy of the final audit report issued by the auditor for the period described in Item 1; and (4) the information included in this data collection form is accurate and complete. I declare the foregoing is true and correct.

AUDITEE CERTIFICATION Date ____/____/____
 Date Audit Received From Auditor: ____/____/____
 Name of Certifying Official: _____
 (Please print clearly)
 Title of Certifying Official: _____
 (Please print clearly)
 Signature of Certifying Official: _____

Attachment B:
Lobbying and Debarment forms (federal funds only)

CERTIFICATION REGARDING
DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION
CONTRACTS / SUBCONTRACTS

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, signed February 18, 1986. The guidelines were published in the May 29, 1987 Federal Register (52 Fed. Reg., pages 20360-20369).

INSTRUCTIONS

1. Each provider whose contract/subcontract contains federal monies or state matching funds must sign this certification prior to execution of each contract/subcontract. Additionally, providers who audit federal programs must also sign, regardless of the contract amount. DOH cannot contract with these types of providers if they are debarred or suspended by the federal government.
2. This certification is a material representation of fact upon which reliance is placed when this contract/subcontract is entered into. If it is later determined that the signer knowingly rendered an erroneous certification, the Federal Government may pursue available remedies, including suspension and/or debarment.
3. The provider shall provide immediate written notice to the contract manager at any time the provider learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms “debarred”, “suspended”, “ineligible”, “person”, “principal”, and “voluntarily excluded”, as used in this certification, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the contract manager for assistance in obtaining a copy of those regulations.
5. The provider agrees by submitting this certification that, it shall not knowingly enter into any subcontract with a person who is barred, suspended, declared ineligible, or voluntarily excluded from participation in this contract/subcontract unless authorized by the Federal Government.
6. The provider further agrees by submitting this certification that it will require each subcontractor of this contract/subcontract, whose payment will consist of federal monies, to submit a signed copy of this certification.
7. The Department of Health may rely upon a certification of a provider that it is not debarred, suspended, ineligible, or voluntarily excluded from contracting/subcontracting unless it knows that the certification is erroneous.
8. This signed certification must be kept in the contract manager’s file. Subcontractor’s certifications must be kept at the contractor’s business location.

CERTIFICATION

- (1) The prospective provider certifies, by signing this certification, that neither it nor its principals is recently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this contract/subcontract by any federal department or agency.
- (2) Where the prospective provider is unable to certify to any of the statements in this certification, such prospective provider shall attach an explanation to this certification.
- (3) By initialing, the Contract Manager certifies that the prospective provider does not have an active exclusion record in the [System for Award Management \(SAM\)](#) database.

_____ Initials: _____ Verification Date: _____

Name: _____ Title: _____

Signature: _____ Date: _____

**Attachment C:
Sample HPV Vaccination Baseline Measurement Tool**

Health System: Characteristics	
Health system name:	
Number of Clinics:	
Clinic 1: Characteristics	
Clinic name:	
Clinic city:	
Clinic state:	
Clinic type:	
# of primary care providers at clinic:	
Name of Electronic Health Record:	
HPV vaccine used:	
Clinic 1: Patient Population Characteristics	
Total # of clinic patients, age 11-15:	
# of patients, age 11-15, female:	
# of patients, age 11-15, male:	
# of patients, age 11-15, uninsured:	
Clinic 2: Characteristics	
Clinic name:	
Clinic street address:	
Clinic city:	
Clinic state:	
Clinic type:	
# of primary care providers at clinic:	
Name of Electronic Health Record:	
HPV vaccine used:	
Clinic 2: Patient Population Characteristics	
Total # of clinic patients, age 11-15:	
# of patients, age 11-15, female:	
# of patients, age 11-15, male:	
# of patients, age 11-15, uninsured:	