

**FUNDING AGREEMENT #6593  
AMENDMENT I**

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**This First Amendment** to that Funding Agreement #6593, is made and entered into by and between the County of El Dorado, a political subdivision of the State of California (hereinafter referred to as "County") and Marshall Medical Center, a California Non-Profit Corporation, duly qualified to conduct business in the State of California, whose principal place of business is 1100 Marshall Way, Placerville, California 95667, (hereinafter referred to as "Subrecipient");

**RECITALS**

**WHEREAS**, County's Health and Human Services Agency (HHSA) with grant funding administered through the California Immunization Program, Immunization Local Assistance Grant, awarded by the California Department of Public Health (CDPH) under Grant Agreement No. 17-10315 (hereinafter referred to as "Grant 1"), to assist in preventing and controlling vaccine-preventable diseases in the local health jurisdiction, pursuant to Funding Agreement #6593, dated September 27, 2022, incorporated herein and made by reference a part hereof (hereinafter referred to as "Agreement");

**WHEREAS**, the parties hereto desire to amend the Agreement to include subsequent California Immunization Program funding awarded to HHSA by CDPH under Immunization Local Grant Agreement #22-11034 (hereinafter referred to as "Grant 2"), hereby amending **ARTICLE I, Use of Funds and Payment**;

**WHEREAS**, the parties hereto desire to amend the Agreement to extend the expiration date of June 30, 2024, for one (1) additional year, amending **ARTICLE II, Term**;

**WHEREAS**, the parties hereto desire to amend the Agreement to update language, amending **ARTICLE IV, Federal Funding Notification, ARTICLE VII, Nondiscrimination, ARTICLE XXI, Notice to Parties, ARTICLE XXVIII, Conflict of Interest, ARTICLE XXXIII, Administrator, and ARTICLE XXXIX, Special Terms and Conditions**, and adding **Exhibit C**, marked "California Levine Act Statement" incorporated herein and made by reference a part hereof; and

**WHEREAS**, unless otherwise specified herein, the following terms and conditions shall be effective upon final execution of this First Amendment to that Agreement #6593.

**NOW THEREFORE**, in consideration of the foregoing and the mutual promises and covenants hereinafter contained, County and Subrecipient mutually agree to amend the terms of the Agreement in this First Amendment to Agreement #6593 on the following terms and conditions:

1) **ARTICLE I, Use of Funds and Payment**, of the Agreement is amended in its entirety to read as follows:

**ARTICLE I**

**Use of Funds and Payment:**

**Use of Funds:** Subrecipient agrees to furnish personnel, equipment, supplies, travel and other materials, as needed to: (1) Provide access to immunizations for vaccines recommended by the Advisory Committee on Immunization Practices (ACIP), <https://www.cdc.gov/vaccines/hcp/acip-recs/index.html>, to protect the local population; (2) Assist in detecting, reporting, and controlling vaccine-preventable diseases in its service area; and (3) Continue Vaccine For Children (VFC) Provider status, including vaccine management, storage and handling requirements and data submission to the state vaccine registry, the California Immunization Registry (CAIR).

**Payment:** County agrees to reimburse funds expended prior to the termination date, or as may be extended, up to a maximum amount of \$350,000 to Subrecipient following final execution of this First Amendment to that Agreement #6593 and within forty-five (45) days of receipt and approval of a Statement of Funds to include an original invoice(s) on Subrecipient’s letterhead referencing Agreements #6593 and CDPH Grant Agreements #17-10315 and #22-11034.

A. Invoices / Remittance shall be addressed as indicated in the table below or to such other location as County or Subrecipient may direct per the Article titled “Notice to Parties.”

<b>Mail invoices to:</b>	<b>Mail remittance to:</b>
Health and Human Services Agency Attn: Fiscal Unit 3057 Briw Road, Suite B Placerville, CA 95667  Or email to (preferred method): PHinvoice@edcgov.us	Marshall Medical Center Attn: Accounts Payable 1100 Marshall Way Placerville, CA 95667

Subrecipient shall keep and maintain all necessary records sufficient to properly and accurately reflect all costs claimed to have been incurred in order for County to properly audit all expenditures. County shall have access, at all reasonable times, to the records for the purpose of inspection, audit, and copying.

Funding shall not be used for political advocacy of any kind and shall not be used for individual person or business promotion or advertisement. Any person or business name mentioned in County-funded materials must be a sponsor or direct participant in the event of promotional effort. Any listing of service or product providers or co-sponsors must be inclusive. Any advertising space or time purchased by a person or business must be clearly and separately identified as paid advertising.

- 2) **ARTICLE II, Term**, of the Agreement is amended in its entirety to read as follows:

**ARTICLE II**

**Term:** This Agreement shall become effective upon final execution by both parties hereto and shall cover the period of September 27, 2022, through June 20, 2025.

- 3) **ARTICLE VI, Federal Funding Notification**, of the Agreement is amended in its entirety to read as follows:

**ARTICLE VI**

**Federal Funding Notification:** An award/subaward or contract associated with a covered transaction may not be made to a subrecipient or contractor who has been identified as suspended or debarred from receiving federal funds. Additionally, counties must annually verify that the subrecipient and/or contractor remains in good standing with the federal government throughout the life of the agreement/contract.

Subrecipient agrees to comply with Federal procedures in accordance with 2 C.F.R. Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

Any costs for which payment has been made to Subrecipient that are determined by subsequent audit to be unallowable under 48 CFR Part 31 or 2 CFR Part 200 are subject to repayment by Subrecipient to County.

Consistent with 2 CFR 180.300(a), County has elected to verify whether Subrecipient has been suspended or using the federal System for Award Management (SAM). The federal SAM is an official website of the federal government through which counties can perform queries to identify if a subrecipient or contractor is listed on the federal SAM excluded list and thus suspended or debarred from receiving federal funds.

- A. System for Award Management: Subrecipient is required to obtain and maintain an active Universal Entity Identifier (UEI) No. in the System for Award Management (SAM) system at <https://sam.gov/content/home>. Noncompliance with this requirement shall result in corrective action, up to and including termination pursuant to the provisions contained herein this Agreement under the Article(s) titled "Fiscal Considerations" or "Default, Termination, and Cancellation."
- B. Catalog of Federal Domestic Assistance: Pursuant to the Office of Management and Budget (OMB) Uniform Grants Guidance, all recipients and sub-recipients of federal funds must be provided the Assistance Listing Numbers (ALN) number at the time the contract is awarded. The following are ALN numbers, award specific information, and program titles for programs administered by the County on behalf of California Department of Public Health that may apply to this contract:

Federal Funding Information			
<b>Subrecipient:</b>	Marshall Medical Center	<b>UEI #:</b> VKNLXBM379N5	
<b>Award Term:</b>	September 27, 2022 – June 30, 2025	<b>EIN #:</b>	
<b>Total Federal Funds Obligated:</b> Up to \$350,000			
Federal Award Information			
ALN Number	Federal Award ID Number (FAIN)	Federal Award Date / Amount	Program Title
93.539	5 NH23IP000717-05-00	02/24/2017	Immunization Cooperative Agreements
93.268	6 NH23IP000717-05-02	06/25/2018	Immunization Cooperative Agreements
<b>Project Description:</b>	Immunization Local Assistance Grant Funding Agreements #17-10315 (Grant 1) and #22-11034 (Grant 2)		
<b>Awarding Agency:</b>	California Department of Public Health		
<b>Pass-through Entity</b>	County of El Dorado, Health and Human Services Agency		
<b>Indirect Cost Rate or de minimus</b>	Indirect Cost Rate: _____		De minimus <input checked="" type="checkbox"/>
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Award is for research and development.	

4) **ARTICLE VII, Nondiscrimination**, of the Agreement is amended in its entirety to read as follows:

**ARTICLE VII**

**Nondiscrimination:**

- A. County may require Contractor’s services on projects involving funding from various state and/or federal agencies, and as a consequence, Contractor shall comply with all applicable nondiscrimination statutes and regulations during the performance of this Agreement including but not limited to the following: Contractor and its employees and representatives shall not unlawfully discriminate against any employee or applicant for employment because of race, religion, color, national origin, ancestry, physical handicap, mental disability, medical condition, genetic information, military or veteran status, marital status, age, gender, gender identity, gender expression, sexual orientation, or sex; Contractor shall, unless exempt, comply with the applicable provisions of the Fair Employment and Housing Act (Government Code, section 12900 et seq.) and applicable regulations promulgated thereunder (California Code of Regulations, Title 2, section 11000 et seq.); the applicable regulations of the Fair Employment and Housing Commission implementing Government Code, section 12990, set forth in Subchapter 5 of Chapter 5 of Division 4.1 of Title 2 of the California Code of Regulations incorporated into this Agreement by reference and made a part hereof as if set forth in full; and Title VI of the Civil Rights Act of 1964, as amended. Contractor and its employees and representatives shall give written notice of their obligations under this clause as required by law.
- B. Where applicable, Contractor shall include these nondiscrimination and compliance provisions in any of its agreements that affect or are related to the services performed herein.

- C. Contractor's signature executing this Agreement shall provide any certifications necessary under the federal laws, the laws of the State of California, including but not limited to Government Code Section 12990 and Title 2, California Code of Regulations, Section 11102.
- D. Contractor shall comply with Exhibit A, marked "Vendor Assurance of Compliance with Nondiscrimination in State and Federally Assisted Programs," incorporated herein and made by reference a part hereof. Contractor shall acknowledge compliance by signing and returning Exhibit A upon request by County.

5) **ARTICLE XXI, Notice to Parties**, of the Agreement is amended in its entirety to read as follows:

**ARTICLE XXI**

**Notice to Parties:** All notices to be given by the parties hereto shall be in writing, with both the County Health and Human Services Agency and County Chief Administrative Office addressed in said correspondence, and served by either United States Postal Service mail or electronic email. Notice by mail shall be served by depositing the notice in the United States Post Office, postage prepaid and return receipt requested, and deemed delivered and received five (5) calendar days after deposit. Notice by electronic email shall be served by transmitting the notice to all required email addresses and deemed delivered and received two (2) business days after service.

Notices to County shall be addressed as follows:

COUNTY OF EL DORADO  
 Health and Human Services Agency  
 3057 Briw Road, Suite B  
 Placerville, CA 95667  
 ATTN: Contracts Unit  
 Email: [hhsa-contracts@edcgov.us](mailto:hhsa-contracts@edcgov.us)

with a copy to:

COUNTY OF EL DORADO  
 Chief Administrative Office  
 Procurement and Contracts Division  
 330 Fair Lane  
 Placerville, CA 95667  
 ATTN: Purchasing Agent  
 Email: [procon@edcgov.us](mailto:procon@edcgov.us)

Notices to Contractor shall be addressed as follows:

MARSHALL MEDICAL CENTER  
 1100 Marshall Way  
 Placerville, CA 95667  
 ATTN: Contracts Department  
[mentwistle@marshallmedical.org](mailto:mentwistle@marshallmedical.org)

or to such other location or email as the Contractor directs.

- 6) **ARTICLE XXVIII, Conflict of Interest**, of the Agreement is amended in its entirety to read as follows:

**ARTICLE XXVIII**

**Conflict of Interest:** The parties to this Agreement have read and are aware of the provisions of Government Code Section 1090 et seq. and the Political Reform Act of 1974 (Section 87100 et seq.), relating to conflict of interest of public officers and employees. Individuals who are working for Subrecipient and performing work for County and who are considered to be a Consultant within the meaning of Title 2, California Code of Regulations, Section 18700.3, as it now reads or may thereafter be amended, are required to file a statement of economic interest in accordance with County's Conflict of Interest Code. County's Contract Administrator shall at the time this Agreement is executed make an initial determination whether or not the individuals who will provide services or perform work pursuant to this Agreement are Consultants within the meaning of the Political Reform Act and County's Conflict of Interest Code. Statements of economic interests are public records subject to disclosure under the California Public Records Act.

Subrecipient covenants that during the term of this Agreement neither it, or any officer or employee of the Subrecipient, has or shall acquire any interest, directly or indirectly, in any of the following:

- A. Any other contract connected with, or directly affected by, the services to be performed by this Agreement.
- B. Any other entities connected with, or directly affected by, the services to be performed by this Agreement.
- C. Any officer or employee of County that are involved in this Agreement.

If Subrecipient becomes aware of a conflict of interest related to this Agreement, Subrecipient shall promptly notify County of the existence of that conflict, and County may, in its sole discretion, immediately terminate this Agreement by giving written notice as detailed in the Article titled "Default, Termination and Cancellation."

Pursuant to Government Code section 84308 (SB 1439, the Levine Act), Subrecipient shall complete and sign the attached Exhibit C, marked "California Levine Act Statement," incorporated herein and made by reference a part hereof, regarding campaign contributions by Subrecipient, if any, to any officer of County.

- 7) **ARTICLE XXXIII, Administrator**, of the Agreement is amended in its entirety to read as follows:

**ARTICLE XXXIII**

**Administrator:** The County Officer or employee with responsibility for administering this Agreement is Heather Orchard, MSN, FNP, PHN, Public Health Nursing Supervisor, Public Health Division, Health and Human Services Agency (HHSA), or successor. In the instance where the named Contract Administrator no longer holds this title with County and a successor is pending, or HHSA has to temporarily delegate this authority, County Contract Administrator's Supervisor shall designate a representative to temporarily act as the primary Contract Administrator of this Agreement and HHSA Administration shall provide the

Contractor with the name, title and email for this designee via notification in accordance with the Article titled "Notice to Parties" herein.

- 8) **ARTICLE XXXIX, Special Terms and Conditions**, of the Agreement is amended in its entirety to read as follows:

**ARTICLE XXXIX**

**Special Terms and Conditions:**

Subrecipient, by signing this Agreement, becomes a sub recipient of funds via the Immunization Local Assistance Grant Agreement #17-10315, and subsequent Grant Agreement #22-11034, administered by the CDPH, available at <https://EIDoradoCounty.ca.gov/HHSA-Contractor-Resources>. As such, Grantee agrees to adhere to all applicable terms and conditions, including but not limited to those provisions contained herein below:

The use of headings or titles throughout this article is for convenience only and shall not be used to interpret or to govern the meaning of any specific term or condition. The terms "contract", "Contractor" and "SubContractor" shall also mean, "agreement", "grant", "grant agreement", "Grantee" and "Subgrantee" respectively. The terms "California Department of Public Health" and "CDPH" shall have the same meaning and refer to the California State agency.

This article contains provisions that require strict adherence to various contracting laws and policies. Some provisions herein are conditional and only apply if specified conditions exist (i.e., agreement total exceeds a certain amount, agreement is federally funded, etc.). The provisions herein apply to this Agreement unless the provisions are removed by reference on the face of this Agreement, the provisions are superseded by an alternate provision appearing elsewhere in this Agreement, or the applicable conditions do not exist.

Except as herein amended, all other parts and sections of that Agreement #6593 shall remain unchanged and in full force and effect.

**Requesting Contract Administrator Concurrence:**

By: *Heather Orchard*  
Heather Orchard, MSN, FNP, PHN  
Public Health Nursing Supervisor  
Health and Human Services Agency

Dated: 05/09/2024

**Requesting Department Head Concurrence:**

By:   
Jim Diel, LMFT  
Chief Assistant Director  
Health and Human Services Agency

Dated: 05/10/2024

IN WITNESS WHEREOF, the parties hereto have executed this First Amendment to Agreement for Services #6593 on the dates indicated below.

-- COUNTY OF EL DORADO --

By: Wendy Thomas  
Chair  
Board of Supervisors  
"County"

Dated: 6/25/24

Attest:  
Kim Dawson  
Clerk of the Board of Supervisors

By: Kyra Schaufley  
Deputy Clerk

Dated: 6/25/24

-- MARSHALL MEDICAL CENTER --

By: Siri Nelson  
Siri Nelson (May 15, 2024 16:39 PDT)  
Siri Nelson  
Chief Executive Officer  
"Subrecipient"

Dated: 05/15/2024



**Marshall Medical Center  
Exhibit C  
California Levine Act Statement**

California Government Code section 84308, commonly referred to as the "Levine Act," prohibits any officer of El Dorado County from participating in any action related to a contract if he or she accepts, solicits, or directs any political contributions totaling more than two hundred and fifty dollars (\$250) within the previous twelve (12) months, and for twelve (12) months following the date a final decision concerning the contract has been made, from the person or company awarded the contract. The Levine Act also requires disclosure of such contribution by a party to be awarded a specific contract. An officer of El Dorado County includes the Board of Supervisors, any elected official, and the chief administrative officer (collectively "Officer"). It is the Contractor's responsibility to confirm the appropriate "Officer" and name the individual(s) in their disclosure.

Have you or your company, or any agent on behalf of you or your company, made any political contribution(s), or been solicited to make a contribution by an Officer or had an Officer direct you to make a contribution of more than \$250 to an Officer of the County of El Dorado in the twelve months preceding the date of the submission of your proposals or the anticipated date of any Officer action related to this contract?

\_\_\_\_\_ YES  \_\_\_\_\_ NO

If yes, please identify the person(s) by name:  
If no, please type N/A.

Do you or your company, or any agency on behalf of you or your company, anticipate or plan to make any political contribution(s) of more than \$250 to an Officer of the County of El Dorado in the twelve months following any Officer action related to this contract?

\_\_\_\_\_ YES  \_\_\_\_\_ NO

If yes, please identify the person(s) by name:  
If no, please type N/A.

Answering YES to either of the two questions above does not preclude the County of El Dorado from awarding a contract to your firm or any taking any subsequent action related to the contract. It does, however, preclude the identified Officer(s) from participating in any actions related to this contract.

05/15/2024  
\_\_\_\_\_  
Date

Marshall Medical Center  
\_\_\_\_\_  
Type or write name of company

*Siri Nelson*  
Siri Nelson (May 15, 2024 16:39 PDT)  
\_\_\_\_\_  
Signature of authorized individual

Siri Nelson  
\_\_\_\_\_  
Type or write name of authorized individual