WHATCOM COUNTY CONTRACT INFORMATION SHEET

Whatcom County Contract Number: 202201002 – 1

Originating Department: 85 Health									
Division/Program: (i.e. Dept. Division and Program)				8560 Communicable Disease / 856010 Communicable Disease Admin					
Contract or Grant Administrator:					Cindy Hollinsworth				
Contractor's / Agency I	Name:				Aristo Healthcare	Services			
Is this a New Contrac	lew Contract? If not, is this an Amendment or Renewal to an Existing Contract? Yes ⊠ No □								
					CC 3.08.100 (a)) Original Contract #: 202201002				
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Is this a grant agreen						07.000 / 00.000			
Yes No D	☐ If yes, grantor agency contract number(s): ☐ CFDA#: 97.036 / 93					97.036 / 93.268			
Is this contract grant	unded?								
Yes ⊠ No □		If yes, What	com C	ounty grant	contract number(s)		Pending,	WA Sta	te Department of Health
Is this contract the res	sult of a R	RFP or Bid process	?				Contract	Cost	
Yes ☐ No ▷	☐ If y	es, RFP and Bid r	umbe	er(s):	Emergency		Center:		660470 / 627221
Is this agreement exc	luded fror	m E-Verify?	No						
If YES, indicate exclusi	on(s) belo	OW:							
		eement for certifi	ed/lic	ensed profe	essional.				
☐ Contract work is f						or Comme	ercial off the	shelf ite	ms (COTS).
☐ Contract work is t	or less th	an 120 days.			☐ Work relat	☐ Work related subcontract less than \$25,000.			
☐ Interlocal Agreem	ent (betw	veen Governments	s).		☐ Public Wo	rks - Loca	al Agency/Fe	ederally l	Funded FHWA.
Contract Amount:(sum	of origina	al contract amount	and	Council ap	proval required for; a	Il property le	eases, contra	acts or bio	d awards exceeding \$40,000,
any prior amendments):								rease greater than \$10,000 or
					ntract amount, whiche cising an option conta				roved by the council
Mada ada adda ada a		- - t - ff							services, or other capital costs
Varies depending on s rates.	iaii provid	ied and stair nour	y	appro	oved by council in a c	apital budg			
iales.					r award is for supplies		of the or December of	Ondinon	
Not to exceed \$543,73	2				oment is included in E ract is for manufacture				ce are maintenance of electronic
									e from the developer of
			7001		rietary software currer				
Summary of Scope: T	his contra	act provides fundin	g for (COVID-1 vac	ccine administration	services t	throughout \	Whatcon	n County.
Term of Contract:	3.5 1	Months			Expiration Date:		03/31/202	2	
	1. Prepa	VIP-10-C-31-10-27-10-31-31-20-20-3		JT				Date:	01/03/2022
Contract Routing:	2. Attorn	ney signoff:		RB				Date:	01/03/2022
	3. AS Fi	nance reviewed:		M Caldwell				Date:	1/3/22
		riewed (if IT related):						Date:	
		actor signed:						Date:	
	6. Execu	utive Contract Revie	W:	SM				Date:	1/19/2022
	7. Coun	cil approved (if nece	ssary)	: AB2	022-018			Date:	01/11/2022
	8. Execu	utive signed:						Date:	1/19/2022
	9. Origin	nal to Council:						Date:	

WHATCOM COUNTY Health Department



Erika Lautenbach, MPH, Director

Amy Harley, MD, MPH, Co-Health Officer Greg Thompson, MD, MPH, Co-Health Officer

MEMORANDUM

TO: Satpal Sidhu, County Executive

FROM: Erika Lautenbach, Director

RE: Aristo Healthcare Services – COVID Vaccine Clinic Operations Contract Amendment #1

DATE: January 12, 2022

Attached is a contract amendment between Whatcom County and Aristo Healthcare Services for your review and signature.

Background and Purpose

This contract is in response to a notification from Whatcom County Health Department to locally enrolled COVID-19 vaccine providers of Federal Emergency Management Agency (FEMA) funding available to reimburse eligible expenses supporting community COVID-19 vaccination. This contract provides reimbursement for services provided by Aristo Healthcare Services personnel operating COVID-19 vaccine clinics and administering vaccines at community vaccine clinics (CVC) throughout Whatcom County.

On 9/23/2021, the Washington State Department of Health informed all Local Health Jurisdictions (LHJ) that in preparation for future surge needs for booster and pediatric vaccination, LHJs would need to contract with vaccine administration contractors directly and could not utilize state contracts for more than three weeks while entering into independent contracts. There was not adequate time to advertise an RFP and after reaching out to multiple contractors, Aristo was selected to fill gaps for the demand in vaccine clinics that other contractors could not meet.

This original contract began on 12/15/2021 and was executed under the COVID-19 Declaration of Emergency, per Whatcom County Code 3.08.100(A)(6). The purpose of this amendment is to increase funding by \$435,000 to support additional clinics through 03/31/2022.

Funding Amount and Source

Funding for this contract varies depending on actual expenses, however, total funding is estimated not to exceed \$543,732. Funds under the contract are made available by a grant awarded by FEMA, passed through the Washington State Department of Health Mass Vaccination FEMA Grant (CFDA 97.036) and a grant awarded by the US Department of Treasury and subject to section 601(a) of the Social Security Act, as amended by section 5001 of the Coronavirus Aid, Relief and Economic Security Act (CARES Act) and Title V and VI of the CARES Act, passed through the Washington State Department of Health Vaccine Services-CARES Grant (CFDA #93.268). These funds are included in the 2022 budget. Council approval is required as funding exceeds \$40,000.

Please contact Cindy Hollinsworth, Communicable Disease & Epidemiology Manager at 360-778-6160 (CHollins@co.whatcom.wa.us) or Kathleen Roy, Assistant Director at 360-778-6007 (KRoy@co.whatcom.wa.us), if you have any questions or concerns regarding this request.



Whatcom County Contract Number:

202201002 - 1

WHATCOM COUNTY CONTRACT AMENDMENT

PARTIES:

Whatcom County Whatcom County Health Department 509 Girard Street Bellingham, WA 98225 AND CONTRACTOR: Aristo Healthcare Services 4500 9th Ave NE Seattle, WA 98105

CONTRACT PERIODS:

Original: 12/15/2021 – 01/11/2022 Amendment #1: 01/12/2022 – 03/31/2022

THE CONTRACT IDENTIFIED HEREIN, INCLUDING ANY PREVIOUS AMENDMENTS THERETO, IS HEREBY AMENDED AS SET FORTH IN THE DESCRIPTION OF THE AMENDMENT BELOW BY MUTUAL CONSENT OF ALL PARTIES HERETO

DESCRIPTION OF AMENDMENT:

- 1. Extend the duration and other terms of this contract through 03/31/2022.
- 2. Amend Exhibit A Scope of Work, to include additional dates and locations of scheduled clinics.
- 3. Amend Exhibit B Compensation, to increase total estimated funding by \$435,000 for the extended contract period.
- 4. Funding for the total contract period (12/15/2021 03/31/2022) is not to exceed \$543,732.
- 5. All other terms and conditions remain unchanged.
- 6. The effective start date of the amendment is 01/12/2022.

ALL OTHER TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND ANY PREVIOUS AMENDMENTS THERETO REMAIN IN FULL FORCE AND EFFECT. ALL PARTIES IDENTIFIED AS AFFECTED BY THIS AMENDMENT HEREBY ACKNOWLEDGE AND ACCEPT THE TERMS AND CONDITIONS OF THIS AMENDMENT. Each signatory below to this Contract warrants that he/she is the authorized agent of the respective party; and that he/she has the authority to enter into the contract and bind the party thereto.

APPROVAL AS TO PROGRAM	Docusigned by: Lindy Hollinsworth 1C39FE7D78F94A5	1/12/2022
	Cindy Hollinsworth, Communicable Disease & Epidemiol	ogy Manager Date
DEPARTMENT HEAD APPROV	DocuSigned by: Erika Lautenbach	1/12/2022
	Erika Lautenbach, Health Department Director	Date
APPROVAL AS TO FORM:	-Docusigned by: loyu Bukingham -1EE5DDBD9542404	1/12/2022
R	loyce Buckingham, Prosecuting Attorney	Date
FOR THE CONTRACTOR: Docusigned by: Unis Single 502B972BB6BF4E0	Chris Singh, CEO	1/19/2022
Contractor Signature	Print Name and Title	Date
FOR WHATCOM COUNTY: Docusigned by: Satpal Single Sidle 110007(18886453		1/19/2022
Satpal Singh Sidhu, County E	xecutive	Date

CONTRACTOR INFORMATION:

Aristo Healthcare Services

4500 9th Ave NE Seattle, WA 98105

chrisea@aristohealthcareservices.com

EXHIBIT "A" (SCOPE OF WORK)

Aristo Healthcare Services supports COVID-19 vaccine administration throughout Whatcom County in the following ways:

Personnel	Support Provided			
Providers – RNs, ARNPs, PAs, Pharmacists				
Licensed Practical Nurse – LPN	Vaccine management, administration of vaccines,			
Licensed Vocational Nurse – LVN	completion of CDC vaccination record cards			
Nursing Assistant				
(CAN/NAR/HCA/MA)				
Paramedic / EMT	Observation of vaccinated individuals for adverse			
Farametic / Elvi i	reactions; emergency response			
Mobile Vaccine Van Driver	Assists with clinic equipment set-up and take-down and van			
Widdle vaccine van Driver	maintenance on clinic days			
Data Entry Chanielist	Vaccine entries into the Washington State Immunization			
Data Entry Specialist	Information System (WAIIS)			

I. Statement of Work

The Contractor will be reimbursed for personnel and other eligible expenses related to the operation of vaccine administration clinics as part of Whatcom County's public health emergency response to the ongoing COVID-19 pandemic.

Clinics are scheduled as follows:

Date	Location			
December 15, 2021	Mt Baker Jr/Sr High			
December 16, 2021	Alderwood Elementary			
January 5, 2022	Acme Elementary			
January 6, 2022	Cordata Elementary			
January 7, 2022	Options High School			
January 8, 2022	Alderwood Elementary			
January 12, 2022	Mt Baker Jr/Sr High			
January 13, 2022	Options High School			
January 19, 2022	Harmony Elementary			
January 20, 2022	Options High School			
January 26, 2022	Acme Elementary			
January 27, 2022	Cordata Elementary			
February 2022 – TBD				
March 2022 - TBD				

EXHIBIT "B" (COMPENSATION)

I. Budget and Source of Funding: Total funding for this contract is estimated at \$543,732.

The Contractor will bill the County in accordance with the rates indicated on page 17 – Aristo Healthcare Services, LLC Crisis Rates.

The budget for this contract is as follows:

Cost Description	Documents Required Each Invoice	Estimated Total
Vaccine administration related expenses including personnel and supplies/equipment (includes PPE, sharps, medical supplies, etc.)	 Timesheets for the period. Completion of the Cost Summary Workbook provided by the County. Log of vaccines administered including quantity, date, and clinic location. Reimbursement requests for allowable travel (including mileage) must include the name of staff member, dates of travel, starting point and destination, brief description of purpose. Ground transportation, coach airfare and ferries will be reimbursed at cost when accompanied by receipts. Receipts for meals are not required. Meal and mileage rates may not exceed the U.S. GSA Domestic Per Diem Rates (www.gsa.gov), specific to location and must follow federal guidelines. Lodging at rates exceeding federal GSA may be procured after confirming through www.fedrooms.com and keeping documentary evidence (e.g., screenshot including date/time), that there are no rooms available at per diem in Whatcom County. Receipts or paid invoices. 	\$543,732

II. Attestation

Upon full execution of this contract, the Contractor attests that Medicare, Medicaid, HRSA, or any other third-party payor shall not be billed for vaccine administration services provided at the same time as those provided to homebound persons in Whatcom County through this contract. The Contractor attests that if these costs are submitted to any third-party payor for reimbursement, the Contractor will be responsible for repaying the full amount that FEMA has reimbursed. This also includes any Cost Report Reimbursement from Medicare or Medicaid at the end of the fiscal year reporting cycle.

The Contractor may only be reimbursed for FEMA eligible costs, as outlined in the Cost Summary Workbook (to be provided by the County). The Contractor attests that reimbursement of costs for personnel who provided services at vaccine clinics in Whatcom County may occur by following the guidance given in the FEMA Medical Care Policy (incorporated herein as Exhibit D), completing an LHJ Summary Spreadsheet, retaining supporting documentation, and agreeing to fully reimburse costs to Whatcom County if they are reimbursed by any other payor or funding source for the provision of services at Whatcom County vaccine clinics.

III. Invoicing

1. The Contractor shall submit invoices in a format approved by the County. **Final invoices must be received by April 15, 2022.** Invoices submitted for payment must include the items identified in the table above.

- 2. The Contractor shall submit invoices to (include contract/PO #) <u>HL-BusinessOffice@co.whatcom.wa.us</u>.
- 3. Payment by the County will be considered timely if it is made within 30 days of the receipt and acceptance of billing information from Contractor. The County may withhold payment of an invoice if the Contractor submits it more than 30 days after the expiration of this contract.
- 4. Invoices must include the following statement, with an authorized signature and date:
 - I certify that the materials have been furnished, the services rendered, or the labor performed as described on this invoice.
- 5. <u>Duplication of Billed Costs or Payments for Service:</u> The Contractor shall not bill the County for services performed or provided under this contract, and the County shall not pay the Contractor, if the Contractor has been or will be paid by any other source, including grants, for those costs used to perform or provide the services in this contract. The Contractor is responsible for any audit exceptions or disallowed amounts paid as a result of this contract.