# AMENDMENT TWO TO THE GRANT AGREEMENT BETWEEN WYOMING DEPARTMENT OF HEALTH, PUBLIC HEALTH DIVISION AND LARAMIE COUNTY

- 1. Parties. This Amendment is made and entered into by and between the Wyoming Department of Health, Public Health Division (Agency), whose address is: 122 West 25<sup>th</sup> Street, 3<sup>rd</sup> Floor West, Cheyenne, Wyoming 82002 and Laramie County (Subrecipient), whose address is: 310 West 19<sup>th</sup> Street, Suite 300, Cheyenne, Wyoming 82001. This Amendment pertains to the Office of Training, Performance, and Equity.
- 2. <u>Purpose of Amendment.</u> This Amendment shall constitute the second amendment to the Agreement between the Agency and the Subrecipient. The purpose of this Amendment is to reallocate existing funds to expand the activities allowed with a revised Statement of Work.

The original Agreement, dated September 20, 2022, required the Subrecipient to establish and implement a community-based law enforcement and behavioral health co-response to behavioral health emergency calls within Laramie County in partnership with the Agency for a total Agreement amount not to exceed three hundred forty-four thousand, six hundred fifty dollars (\$344,650.00) with an expiration date of May 31, 2023.

Amendment One, dated May 12, 2023, extended the term of the Agreement through May 31, 2024, and reflected the extension of activities in a revised Statement of Work.

- 3. <u>Term of the Amendment.</u> This Amendment shall commence upon the date the last required signature is affixed hereto (Effective Date), and shall remain in full force and effect through the term of the Agreement, as amended, unless terminated at an earlier date pursuant to the provisions of the Agreement, or pursuant to federal or state statute, rule, or regulation.
- 4. Amendments. No amendments are made to the existing Agreement terms or total amount.
- 5. Amended Responsibilities of the Subrecipient.
  - A. As of the Effective Date of this Amendment, Attachment A-1, Revised Statement of Work, which was attached to Amendment One of the Agreement, is superseded and replaced by Attachment A-2, Revised Statement of Work, which is attached to this Amendment and incorporated into the original Agreement by this reference. All references to "Attachment A" in the original Agreement, and in any amendments thereto, are amended to read: "Attachment A-2".
- 6. Amended Responsibilities of the Agency. Responsibilities of the Agency have not changed.
- 7. Special Provisions.

- A. Same Terms and Conditions. With the exception of items explicitly delineated in this Amendment, all terms and conditions of the original Agreement, and any previous amendments, between the Agency and the Subrecipient, including but not limited to sovereign immunity, shall remain unchanged and in full force and effect.
- B. Counterparts. This Amendment may be executed in counterparts. Each counterpart, when executed and delivered, shall be deemed an original and all counterparts together shall constitute one and the same Amendment. Delivery by the Subrecipient of an originally signed counterpart of this Amendment by facsimile or PDF shall be followed up immediately by delivery of the originally signed counterpart to the Agency.

#### 8. General Provisions.

A. Entirety of Agreement. The original Agreement, consisting of ten (10) pages; Attachment A, Statement of Work, consisting of four (4) pages; Amendment One consisting of three (3) pages; Attachment A-1, Revised Statement of Work consisting of five (5) pages; this Amendment Two, consisting of three (3) pages; and Attachment A-2, Revised Statement of Work, consisting of three (3) pages represent the entire and integrated agreement between the parties and supersede all prior negotiations, representations, and agreements, whether written or oral.

THE REMAINDER OF THIS PAGE WAS INTENTIONALLY LEFT BLANK.

9. <u>Signatures.</u> The parties to this Amendment, through their duly authorized representatives, have executed this Amendment on the dates set out below, and certify that they have read, understood, and agreed to the terms and conditions of this Amendment.

This Amendment is not binding on either party until approved by A&I Procurement and the Governor of the State of Wyoming or his designee, if required by Wyo. Stat. § 9-2-3204(b)(iv).

AGENCY: Wyoming Department of Health, Public Health Division	
Stefan Johansson, Director	Date
Stephanie Pyle, MBA Senior Administrator, Public Health Division	Date
SUBRECIPIENT: Laramie County	
Troy Thompson, Chairman  ATTEST:	Date
Debra Lee, Laramie County Clerk	Date
COUNTY ATTORNEY: APPROVAL AS TO FORM	Date
Laramie County Attorney	11.13.23 Date
ATTORNEY GENERAL'S OFFICE: APPROVAL AS TO FORM	<i>S</i> uc
Justina Brand ± 235026 Joshua M. Brackett, Assistant Attorney General	11/3/23 Date

#### **General Description**

This document is a Second Revised Statement of Work (SOW) to identify and describe the important milestones and deliverables for the Grant Agreement (Agreement) between Laramie County (Subrecipient) and the Wyoming Department of Health, Public Health Division (Agency).

The Subrecipient will coordinate a co-response to behavioral health emergency calls between local law enforcement and emergency healthcare settings. Subrecipient will establish a specialized patrol unit, which includes a behavioral health professional trained to deal with behavioral health crises and substance use disorders. This initiative will unify the response of law enforcement services with an immediate mental health response to help mitigate the mental health impacts associated with or exacerbated by COVID-19.

In an effort to lessen social and health inequities in Wyoming, heightened by COVID-19, this project is intended to tailor and adapt evidence-informed policies, systems, and environmental strategies to support individuals experiencing a behavioral health emergency by improving the accessibility of behavioral health professionals responding to such calls. Further, establishing collaborations with critical partners affiliated with underserved populations at higher risk, while connecting community members to programs, healthcare providers, services, and resources they might need is intended to diminish the adverse effects of COVID-19.

#### Timeline and Deliverables

The following outlines specific tasks, deliverable descriptions, and completion dates for the Agreement.

Task	Description	Timeline
1.	Coordinate the Establishment and Use of a Behavioral Health Co Model in Laramie County (serving all municipalities therein)	-Response
A.	Subrecipient will coordinate the co-response model among key partners in law enforcement and an emergency healthcare provider. This includes, but is not limited to the following tasks:  i. Develop and provide the training, methodologies, policies, and procedures needed to conduct this program. This may include, but is not limited to, officer and dispatch orientation, related tasks, and use data to inform decision-making, as well as community outreach and awareness about the co-response unit.  ii. Coordinate with the emergency healthcare setting for the procurement and appropriate distribution of necessary supplies as set forth in the budget narrative below.  iii. Coordinate payment among all partner agencies for personnel overtime in accordance with the budget narrative below.  iv. Work collaboratively with all partner agencies to ensure the specialized response unit responds to calls in organized shifts, based on data indicating peak days and times when related calls occur most often.	Ongoing

	v. Enter into a subcontract for evaluation services and ensure the coordination of and payment for evaluation services. Evaluator will be responsible for establishing the evaluation design to assess the effectiveness of this co-response model for the community. Subrecipient and subcontractor staff will collect and analyze the data necessary for process and outcome evaluation during the project period and provide results of their study to Agency and all partners by de-identifying all data and providing results in aggregate form.	
2.	Administration and Reporting	
A.	Subrecipient shall maintain expense reports for Agency review. Funds included in this grant may be used to support audit expenses incurred by Subrecipient.	Monthly
В.	Subrecipient shall meet all necessary grant reporting functions as required or requested by the Agency.  i. Report responses and services provided to individuals under this program in deidentified aggregate form. Reporting to Agency and all partners simultaneously in a format appropriate for public dissemination.  ii. Wherever possible, collect and utilize data to further inform the programming decisions.	
C.	· Carrier Co. And Andrews Co.	Quarterly Throughout Performance Period

# **Agency Responsibilities**

During the term of this Agreement, Agency will work with the Subrecipient to:

- A. Provide ongoing technical assistance and support the success of the project.
- B. Assess progress, milestones, and reporting.
- C. Communicate regularly with Subrecipient.
- D. Make payments according to the payment structure described in the Agreement and in this SOW.

# **Budget Narrative**

The budget for this project is described below.

The Subrecipient agrees to continue all services referenced in this SOW through the term of the Agreement.

Task	Description	Cost
1.	Coordinate the Establishment and Use of a Behavioral Health Co-Response Model in Laramie County (serving all municipalities therein). To accomplish the deliverables in the SOW, the following budget items are allowed:  A. Personnel overtime: This will cover an estimated twenty (20) hours of overtime for fifty-two (52) weeks (1,040 hours) at an average clinician rate of \$71.99 overtime rate per hour. This budget item shall not exceed \$129,157.60.  B. Emergency healthcare setting supplies: This will cover: two (2) laptops at an estimated cost of \$1,112.90 each (\$2,225.80); cost of backpacks (\$500.00); cost of cold weather clothes and hygiene kit items to be distributed (\$48,636.60); cost of office supplies (\$500.00); and printing costs (\$1,500.00). This budget item shall not exceed \$53,362.40.  C. Law enforcement (city) overtime: This will cover an estimated twenty (20) hours of overtime for fifty-two (52) weeks (1,040 hours) at an average overtime rate of \$50.00 per hour. This budget item shall not exceed \$52,000.00.  D. Law enforcement (county) overtime: This will cover an estimated twenty (20) hours of overtime for fifty-two (52) weeks (1,040 hours) at an average overtime rate of \$47.00 per hour. This budget item will be considered rural carve-out funding to serve the communities outside of Cheyenne, which are rural, and shall not exceed \$48,880.00.  E. Evaluation services: This will cover expenses to establish the evaluation design and implementation. This budget item shall not exceed \$30,250.00. These data will be reported to Agency at the same time as Subrecipient.	\$313,650.00
2.	Administration and Reporting: This will support Subrecipient with the reporting, documentation, and administrative oversight functions of carrying out the grant responsibilities.	\$31,000.00
	TOTAL NOT TO EXCEED:	\$344,650.00

# AMENDMENT ONE TO THE GRANT AGREEMENT BETWEEN WYOMING DEPARTMENT OF HEALTH, PUBLIC HEALTH DIVISION AND LARAMIE COUNTY

- 1. Parties. This Amendment is made and entered into by and between the Wyoming Department of Health, Public Health Division (Agency), whose address is: 122 West 25<sup>th</sup> Street, 3<sup>rd</sup> Floor West, Cheyenne, Wyoming 82002 and Laramie County (Subrecipient), whose address is: 310 West 19th Street, Suite 300, Cheyenne, Wyoming 82001. This Amendment pertains to the Office of Performance Improvement and Health Equity.
- 2. <u>Purpose of Amendment.</u> This Amendment shall constitute the first amendment to the Grant Agreement (Agreement) between the Agency and the Subrecipient. The purpose of this Amendment is to extend the term of the Agreement through May 31, 2024.

The original Agreement, dated September 20, 2022, required the Subrecipient to establish and implement a community-based law enforcement and behavioral health co-response to behavioral health emergency calls within Laramie County in partnership with the Agency for a total Agreement amount not to exceed three hundred forty-four thousand, six hundred fifty dollars (\$344,650.00) with an expiration date of May 31, 2023.

3. <u>Term of the Amendment.</u> This Amendment shall commence upon the date the last required signature is affixed hereto (Effective Date) and shall remain in full force and effect through the term of the Agreement, as amended, unless terminated at an earlier date pursuant to the provisions of the Agreement, or pursuant to federal or state statute, rule, or regulation.

#### 4. Amendments.

A. The second sentence of Section 3 of the original Agreement is hereby amended to read as follows:

"The term of this Agreement is from Effective Date through May 31, 2024."

#### 5. Amended Responsibilities of the Subrecipient.

- A. As of the Effective Date of this Amendment, Attachment A, Statement of Work, which was attached to the original Agreement, is superseded and replaced by Attachment A-1, Revised Statement of Work, which is attached to this Amendment and incorporated into the original Agreement by this reference. All references to "Attachment A" in the original Agreement, and in any amendments thereto, are amended to read: "Attachment A-1".
- 6. Amended Responsibilities of the Agency. Responsibilities of the Agency have not changed.
- 7. Special Provisions.

- A. Same Terms and Conditions. With the exception of items explicitly delineated in this Amendment, all terms and conditions of the original Agreement, and any previous amendments, between the Agency and the Subrecipient, including but not limited to sovereign immunity, shall remain unchanged and in full force and effect.
- B. Counterparts. This Amendment may be executed in counterparts. Each counterpart, when executed and delivered, shall be deemed an original and all counterparts together shall constitute one and the same Amendment. Delivery by the Subrecipient of an originally signed counterpart of this Amendment by facsimile or PDF shall be followed up immediately by delivery of the originally signed counterpart to the Agency.

# 8. General Provisions.

A. Entirety of Agreement. The original Agreement, consisting of ten (10) pages; Attachment A, Statement of Work, consisting of four (4) pages; this Amendment One, consisting of three (3) pages; and Attachment A-1, Revised Statement of Work, consisting of five (5) pages represent the entire and integrated agreement between the parties and supersede all prior negotiations, representations, and agreements, whether written or oral.

THE REMAINDER OF THIS PAGE WAS INTENTIONALLY LEFT BLANK.

9. <u>Signatures.</u> The parties to this Amendment, through their duly authorized representatives, have executed this Amendment on the dates set out below, and certify that they have read, understood, and agreed to the terms and conditions of this Amendment.

This Amendment is not binding on either party until approved by A&I Procurement and the Governor of the State of Wyoming or his designee, if required by Wyo. Stat. § 9-2-3204(b)(iv).

AGENCY: Wyoming Department of Health, Public Health Division	
Stefan Johansson, Director	5-12-2023 Date
Stephanie Pyle, MBA Senior Administrator, Public Health Division	5-9-23 Date
SUBRECIPIENT: Laramie County	
Troy Thompson Chairman	May 2, 2023 Date
ATTEST!	Na. 2 2022
Debra Lee, Laramie County Clerk	Date Date
COUNTY ATTORNEY: APPROVAL AS TO FORM	
Lel. irleece	4·13·23
Laramie County Attorney	Date
ATTORNEY GENERAL'S OFFICE: APPROVAL AS TO FORM	
Lallett * 229878	04-13-2023
Cole R. White Assistant Attorney General	Date

9. Signatures. The parties to this Amendment, through their duly authorized representatives, have executed this Amendment on the dates set out below, and certify that they have read, understood, and agreed to the terms and conditions of this Amendment.

This Amendment is not binding on either party until approved by A&I Procurement and the Governor of the State of Wyoming or his designee, if required by Wyo. Stat. § 9-2-3204(b)(iv).

AGENCY:	•	· ·
Wyoming Department of Health, Public Health Div	ision <sub>.</sub>	. • •
5041	•	5-(2-2013
Stefan Johansson, Director	<del></del>	Date
		Dato
	•	
Stephanie Pyle, MBA	_	Date
Senior Administrator, Public Health Division		
SUBRECIPIENT:		•
Laramie County		
Mugh		May 2.2023
Troy Thompson Chairman	•	May 2, 2023 Date
ATTEST:	•	
Delua V. Voe		May 2, 2023
Debra Lee, Laramie County Clerk	<del>-</del>	May 2, 2023 Date
COUNTY ATTORNEY: APPROVAL AS TO FO	ORM	
Ll. Heece	•	4.13.23
Laramie County Attorney	• .	Date
ATTORNEY GENERAL'S OFFICE: APPROV	AL AS TO FORM	
[Mallik * 127872		04-13-2023
Cole R. White Assistant Attorney General		Date .

understood, and agreed to the terms and conditions of this Amendment. This Amendment is not binding on either party until approved by A&I Procurement and the Governor of the State of Wyoming or his designee, if required by Wyo. Stat. § 9-2-3204(b)(iv). Wyoming Department of Health, Public Health Division Date Stefan Johansson, Director Stephanie Pyle, MBA Date Senior Administrator, Public Health Division SUBRECIPIENT: **Laramie County Date** Laramie County Attorney

<u>Signatures.</u> The parties to this Amendment, through their duly authorized representatives, have executed this Amendment on the dates set out below, and certify that they have read,...

ATTORNEY GENERAL'S OFFICE: APPROVAL AS TO FORM

Cole R. White Assistant Attorney General

have executed this Amendment on the dates set out below, and certify that they have read, understood, and agreed to the terms and conditions of this Amendment.

This Amendment is not binding on either party until approved by A&I Procurement and the Governor of the State of Wyoming or his designee, if required by Wyo. Stat. § 9-2-3204(b)(iv).

AGENCY:
Wyoming Department of Health, Public Health Division

Stefan Johansson, Director

Date

Stephanie Pyle, MBA
Senior Administrator, Public Health Division

SUBRECIPIENT:
Laramic County

Troy Thompson, Chairman

Date

The parties to this Amendment, through their duly authorized representatives,

•

COUNTY ATTORNEY: APPROVAL AS TO FORM

ATTORNEY GENERAL'S OFFICE: APPROVAL AS TO FORM

Cole R. White Assistant Attorney General

Debra Lee, Laramie County Clerk

Laramie County Attorney

9.

04-13-2023 Date

Date

Date

#### **General Description**

This document is a Revised Statement of Work (SOW) to identify and describe the important milestones and deliverables for the Grant Agreement (Agreement) between Laramie County (Subrecipient) and the Wyoming Department of Health, Public Health Division (Agency).

The Subrecipient will coordinate a co-response to behavioral health emergency calls between local law enforcement and emergency healthcare settings. Subrecipient will establish a specialized patrol unit, which includes a behavioral health professional trained to deal with behavioral health crises and substance use disorders. This initiative will unify the response of law enforcement services with an immediate mental health response to help mitigate the mental health impacts associated with or exacerbated by COVID-19.

In an effort to lessen social and health inequities in Wyoming, heightened by COVID-19, this project is intended to tailor and adapt evidence-informed policies, systems, and environmental strategies to support individuals experiencing a behavioral health emergency by improving the accessibility of behavioral health professionals responding to such calls. Further, establishing collaborations with critical partners affiliated with underserved populations at higher risk, while connecting community members to programs, healthcare providers, services, and resources they might need is intended to diminish the adverse effects of COVID-19.

#### Timeline and Deliverables

The following outlines specific tasks, deliverable descriptions, and completion dates for the Agreement.

Task	Description	Timeline
1.	Coordinate the Establishment and Use of a Behavioral Health Co Model in Laramie County (serving all municipalities therein)	-Response
<b>A.</b>		Ongoing

ity Coordinate with the amount of the later of the Co.	
iv. Coordinate with the emergency healthcare setting for the	
procurement of necessary supplies as set forth in the budget	]
narrative below.	
v. Coordinate payment among all partner agencies for personnel	
overtime in accordance with the budget narrative below.	Ì
vi. Work collaboratively with all partner agencies to ensure the	
specialized response unit responds to calls in organized shifts,	ļ
based on data indicating peak days and times when related calls	
occur most often.	
vii. Enter into a subcontract for evaluation services and ensure the	
coordination of and payment for evaluation services. Evaluator	
will be responsible for establishing the evaluation design to	
assess the effectiveness of this co-response model for the	
community. Subrecipient and subcontractor staff will collect and	
analyze the data necessary for process and outcome evaluation	
during the project period and provide results of their study to	
Agency and all partners by de-identifying all data and providing	
results in aggregate form.	
2. Administration and Reporting A. Subrecipient shall maintain expense reports for Agency review	
The state of the s	g
incurred by Subrecipient.	Monthly
B. Subrecipient shall meet all necessary grant reporting functions as	
required or requested by the Agency.	
i. Report responses and services provided to individuals under	
this program in deidentified aggregate form. Reporting to	
Agency and all partners simultaneously in a format	
appropriate for public dissemination.	
ii. Wherever possible, collect and utilize data to further inform	
the programming decisions.	
o. I seems a deartory myorce and supporting documentation by the	uarterly
twentieth (20th) day of the month following the completion of the	roughout
quarter.	formance Period
	renoa
Quarterly payments shall adhere to the following:	.
Effective Date – June 30, 2022	
July 1, 2022 – September 30, 2022	
October 1, 2022 - December 31, 2022	ł
January 1, 2023 – March 31, 2023	Í
April 1, 2023 – May 31, 2023	
Additional reporting dates to be determined.	

#### ATTACHMENT A-1 - REVISED STATEMENT OF WORK

#### **Agency Responsibilities**

During the term of this Agreement, Agency will work with the Subrecipient to:

- A. Provide ongoing technical assistance and support the success of the project.
- B. Assess progress, milestones, and reporting.
- C. Communicate regularly with Subrecipient.
- D. Make payments according to the payment structure described in the Agreement and in this SOW.

THE REMAINDER OF THIS PAGE WAS INTENTIONALLY LEFT BLANK.

# **Budget Narrative**

The budget for this project is described below.

The Subrecipient agrees to continue all services referenced in this SOW through the term of the Agreement.

Tjask	FF 150	Describition:	ලියේ ්
1.	Coord	inate the Establishment and Use of a Behavioral Health Co-Response	- 9000
	Model	in Laramie County (serving all municipalities therein). To	
	accom	plish the deliverables in the SOW, the following budget items are	
	allowe		
	A.	Personnel: This will compensate one (1) full-time behavioral health	
		professional per contract period to coordinate and work with law	
		enforcement to respond to behavioral health calls (\$80,600.00 including	
		benefits); and one (1) part-time position to support coverage of	
		behavioral health professionals to work with law enforcement	
		(\$40,300.00 with benefits). This budget item shall not exceed	
		\$120,900.00.	1
	B.	Personnel overtime: This will cover an estimated twenty (20) hours of	
		overtime for fifty-two (52) weeks (1,040 hours) at an average clinician	
		rate of \$52.50 overtime rate per hour. This budget item shall not exceed	
		\$54,600.00.	
	C.	Emergency healthcare setting supplies: This will cover: two (2) cell	
		phones at an estimated cost of \$800.00 each, plus service at an	6212 650 00
		estimated \$80.00/month (\$3,250.00); two (2) laptops at an estimated	\$313,650.00
9		cost of \$1,000.00 each (\$2,000.00); and printing costs (\$1,500.00). This	1
		budget item shall not exceed \$7,020.00.	
	D.	Law enforcement (city) overtime: This will cover an estimated twenty	
		(20) hours of overtime for fifty-two (52) weeks (1,040 hours) at an	
		average overtime rate of \$50.00 per hour. This budget item shall not	
1		exceed \$52,000.00.	
	E.	Law enforcement (county) overtime: This will cover an estimated	
		twenty (20) hours of overtime for fifty-two (52) weeks (1,040 hours) at	
		an average overtime rate of \$47.00 per hour. This budget item will be	
		considered rural carve-out funding to serve the communities outside of	
		Cheyenne, which are rural, and shall not exceed \$48,880.00.	
]	F.	Evaluation services: This will cover expenses to establish the evaluation	
	~•	design and implementation. This budget item shall not exceed	
		\$30,250.00. These data will be reported to Agency at the same time as	
		Subrecipient.	
		Buoleoipient.	

### ATTACHMENT A-1 - REVISED STATEMENT OF WORK

2.	Administration and Reporting: This will support Subrecipient with the reporting, documentation, and administrative oversight functions of carrying out the grant responsibilities.	\$31,000.00
<u> </u>	TOTAL NOT TO EXCEED:	\$344,650.00



# LARAMIE COUNTY GOVERNMENT

Unique Entity ID CAGE / NCAGE Purpose of Registration

E9DLJC1HGNQ8 398U8 Federal Assistance Awards Only

Registration Status Expiration Date
Active Registration Nov 30, 2023
Physical Address Mailing Address
309 W 207H ST 310 W. 19TH Street

Chayenna, Wyoming 82001-3601 Suite 300

United States Cheyenne, Wyoming 82001-4449

United States .

**Business Information** 

Doing Business as Division Name Division Number (blank) Laramle County (blank)

Congressional District State / Country of Incorporation URL
Wyoming 00 (blank) / (blank) (blank)

Registration Dates

Activation Date Submission Date Initial Registration Date

Dec 5, 2022 : Nov 30, 2022 May 18, 2005

**Entity Dates** 

Entity Start Date Fiscal Year End Close Date

Jan 1, 1890 Jun 30

Immediate Owner

CAGE Legal Business Name (blank) (blank)

Highest Level Owner

CAGE Legal Business Name (blank) (blank)

**Executive Compensation** 

Registrants in the System for Award Management (SAM) respond to the Executive Companiation questions in accordance with Section 6202 of P.L. 110-252, amending the Federal Funding Accountability and Transparency Act (P.L. 109-282). This information is not displayed in SAM. It is sent to USAspending gov for display in association with an eligible award. Maintaining an active registration in SAM demonstrates the registrant responded to the questions.

#### Proceedings Questions

Registrants in the System for Award Management (SAM:gov) respond to proceedings questions in accordance with FAR 52.209-7, FAR 52.209-9, or 2. C.F.R. 200 Appendix XII. Their responses are displayed in the responsibility/qualification section of SAM.gov. Maintaining an active registration in SAM.gov demonstrates the registrant responded to the proceedings questions.

#### Exclusion Summary

Active Exclusions Records?

No

#### SAM Search Authorization

I authorize my entity's non-sensitive information to be displayed in SAM public search results:

Yes

#### Entity/Types

**Business Types** 

Entity Structure Entity Type Organization Factors
U.S. Government Entity US Local Government (blank)

Profit Structure (blank)

#### Socio-Economic Types

Check the registrant's Reps & Certs, if present, under FAR 52.212-3 or FAR 52.219-1 to determine if the entity is an SBA-certified HUBZone small business concern. Additional small business information may be found in the SBA's Dynamic Small Business Search if the entity completed the SBA supplemental pages during registration.

#### **Government Types**

**U.S. Local Government** 

County

Other Government Entities

Council of Governments

#### Financial Information

Accepts Credit Card Payments

Debt Subject To Offset

No

Nο

**EFT Indicator** 

CAGE Code

0000

398U8

#### Points of Contrat

#### **Electronic Business**

۶.

310 W 19TH Street

Sandra L Newland, Grants Manager

Suite 320

Cheyenne, Wyoming 82001

**United States** 

#### **Government Business**

2.

310 W. 19TH Street

Sandra Newland, Grants Manager

Suite 320

Cheyenne, Wyoming 82001

**United States** 

#### Past Performance

2

310 West 19TH Street

Sandra Newland

Suite 300

Cheyenne, Wyoming 82001

United States

KAREN Fortney

309 W 20TH ST

Cheyenne, Wyoming 82001

United States

#### Service Classifications

NAICS Codes

Primary

**NAICS Codes** 

**NAICS Title** 

#### Disaster Response

This entity does not appear in the disaster response registry.



# CERTIFICATE OF LIABILITY COVERAGE

The Wyoming Association of Risk Management (WARM), a joint-powers liability pool, provides comprehensive general liability and automobile liability coverage to Laramie County, Wyoming, subject to the following limitations:

- \$250,000 per claimant as listed in W.S. 1-39-118.
- \$500,000 per occurrence as listed in W.S. 1-39-118.
- \$16,000,000 per claim for claims brought solely under Federal Law as provided in W.S. 1-39-118(b)(ii).
- \$16,000,000 per claim for all other claims not brought under the Wyoming Governmental Claims Act.
- Laramie County and WARM preserve all immunities under Wyoming law.
- The terms and conditions of the WARM coverage document also restrict coverage.
- The coverage period is July 1, 2022 through July 1, 2023.

Certified:

Joseph Constantino
Executive Director

# Contract #: \_229872

Entry Date: 3/21/2023 11:24:49 AM

**Department:** Wyoming Department of Health, Public Health

Division

**Agency Contact: Mcguire, Tammy** 

Phone: 307-214-5123

Other Agency Contact:

WYOMING ATTORNEY GENERAL'S OFFICE

APR 13 2023

Cole R. White APPROVED AS TO FORM

**Client Comments:** 

600 Deins

Contractor/Vendor Name: Laramie County

Contract Title: Amendment One/ OPIHE

**Contract Type:** Amendment

**Contract Amount: 344650.0000** 

**Contract Effective Date:** 

Contract Expiration Date: 5/31/2024 12:00:00 AM

Status: AG Approved as to Form

RETURN VIA: Ink Signature -- Inter-agency-Mail

Assigned Attorney: Cole White



# Public Health Division 122 West 25<sup>th</sup> Street, 3<sup>rd</sup> Floor West Cheyenne, WY 82002 307-777-6004 • 800-599-9754 Fax 307-777-8687 www.health.wyo.gov



Stefan Johansson Director

Mark Gordon Governor

#### **DIRECTOR'S AMENDMENT MEMORANDUM**

Date:

May 5, 2023

To:

Stefan Johansson, Director

Wyoming Department of Health

11

From:

Holly Scheer, MS, Performance Improvement and Health Equity Manager, Public

Health Division

Subject:

Amendment; Laramie County; \$0

Funding Source (Phase):

FED-0584-DISPAROPS-GFY20

Ref.:

HS-2023-006

Priority: Normal.

Purpose: The Wyoming Department of Health, Public Health Division, is requesting a contract amendment with Laramie County to extend the term of the grant agreement through May 31, 2024.

Justification: The health disparities grant, which funds this grant agreement, was scheduled to end on May 31, 2023. Public Health Division just received approval for a No Cost Extension. This Amendment changes the end date of the original grant agreement from May 31, 2023 to May 31, 2024. This Amendment extends the contract term, but does not impact the total grant agreement amount.

Exceptions: There are no exceptions.

HS/tm

Attachments:

Amendment One

Original Grant Agreement Revised Statement of Work

c: Stephanie Pyle, MBA, Senior Administrator, Public Health Division Lisa Wordeman, MS, CPM, Operations Section Chief, Public Health Division

# Wyoming Department of Health Fiscal Services Contract (600 Series) Required Submission Form

FOR CONTRACT WITH: (Laramie County)

	Attach in this			cal Documents (3) lication (if applical		
Division:	PHD	Program:	PADM	Fiscal manager & Phone #	Ramage	Fiscal Mgnr Approval. Yes
Grant(s):	Yes No	Grant Period(s):		Contract Term:		Date:
Current BFY	Source of Funds	Phase	Current Budget	Encumbrances + Expenditures to Date	Funding fo Contract	r Unobligated Funds
23	FF COV	DISPAROPS	\$ 37,062,950.00	\$ 35,039,689.00	334,650	\$ 2,023,261.00
				no new funds add		
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	the following type Local Governm Federal Govern Private Instituti Grant Award Ag ARRA/ACA Fur Other	ent iment ons and Organiz greement/Grant	*ALL FE	DERALLY FUNDE ED FEDERAL PRO		IUST CONTAIN

October 2020

	LFS-GA		•	•		BFY	<b>ו</b>	Date	Accountin	ng Use Only
Rev	sed 11/2018	<del>-</del> ,					1	5445	Approved by	
	Type	Agency	,	ID Number		<b>.</b>	<b>-</b> • 1	<u> </u>	Date Approve	
L	GAE	048		PADM		J			· Law Appliance	
	Venitor Nur	nber -		<del></del>	······································	endor Name		·	Encumbrance 1	Fotal
	VC*8573	io		•	Laramio	County, Wy	omina		•	
		<u> </u>	310 W 19	8th St., Suite 300	- Landing	County, 117	January .			
Stre	et Address:	ł	•						\$334,650.	
-	y/State/Zip					Cebi	eleston <del>e</del> #		\$334,030.	<u> </u>
	<u> </u>		Cheye	nne, Wy 82001		Cont	ract Term	Effective D	ate - May 31, 2024	4
'Res	p Party/ Ext			<del></del>		Cont	ract Total	<b>\$3</b>	34,650.00	<u>.</u> ]
ſ	CBJ		SUB OBJ			•	•			
ı	OBJ		300 001		•			-		
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enl.	CONTING	Description	n .	Amount	Fund	Unit	Appr	Function	Program	Phase/PP
1	Communi	tyCo-Respons		\$ 344,650.00		0584	cov	0	DISPAROPS	GFY20
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3 4 5 6 7 8			DTAL	\$344,650.00						
3 4 5 6 7 8			DTAL	\$344,650.00						
3 4 5 6 7 8			DTAL	\$344,850.00						
23   14   15   16   17   18   19   1			DTAL	\$344,850.00						
)3 )4 )5 )8 )7			DTAL	\$344,650.00						
3 4 5 6 7 8	PROGRAM	Mgr	DTAL	\$344,650.00			FISCAL			
)3 )4 )5 )8 )7	PROGRAM APPROV	Mgr	DTAL	\$344,650.00			FISCAL			
)3 )4 )5 )8 )7		Mgr	DTAL	\$344,850.00			FISCAL			
)3 )4 )5 )8 )7		Mgr	DTAL	\$344,850.00			FISCAL			