

The AA Process Guide

A guide for DPH Program Staff about the process for the Local Health Departments' Agreement Addenda, Budgetary Estimates, Consolidated Agreements, and Funding Authorizations

Contracts Office
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1. Introduction

This guide provides the Division of Public Health staff with the process for producing the Consolidated Agreements, Agreement Addenda, Budgetary Estimates, and Funding Authorizations with local health departments. This process does not include programmatic or other federal and state guidelines required in the daily operations of these services.

Before the start of each fiscal year, the Division of Public Health and the local health departments execute a Consolidated Agreement to establish the terms and conditions governing the use of federal and state funds. An Agreement Addendum will be prepared well before the start of each fiscal year — one for each funded program Activity —to establish annual program objectives to be achieved by the local health departments. These Agreement Addenda are addenda to the Consolidated Agreement.

In addition, Budgetary Estimates for those Activities will be entered and approved in the Aid-to-Counties database. Local health departments and Division of Public Health programs will be able to track proposed estimates in the Aid-to-Counties database from the approval process to completion.

The Division of Public Health Budget Office will send Funding Authorizations to local health departments after the budget is certified. Per Session Law 2001-424, Senate Bill 1005; Section 21.16, the Division of Public Health must notify the local health departments of approved estimates before February 15 of each year. Payments are contingent upon DPH’s receipt of an executed Consolidated Agreement and Agreement Addenda.

Local health departments are required to submit electronic monthly expenditure reports into the Aid-to-Counties database to receive reimbursement for services performed.

2. Terms Used in this Guide

- AAAgreement Addendum
- AA+BE.....An AA combined with its corresponding BE into a single document.
All AA pages are followed by the two BE pages. For paper documents, the AA and BE are stapled together. For electronic documents, the AA and BE are in a single PDF file.
- AA+Supplement+BE...An AA combined with its corresponding Supplement page and BE into a single document.
- AA Team LeaderThe AA Team Leader is in the DPH Contracts Office
- ATC databaseThe Aid-to-Counties database
- BE.....Budgetary Estimate
- Budget OfficeAll references to the Budget Office refer to the DPH Budget Office
- CAConsolidated Agreement
- Contracts Manager.....The Contracts Manager is in the DPH Contracts Office
- Contracts Office.....All references to Contracts Office refer to the DPH Contracts Office
- Controller’s Office.....All references to Controller’s Office refer to the DHHS Controller’s Office
- Encumbrance Officer...The Encumbrance Officer is in the DPH Contracts Office
- FAFunding Authorization
- DPHDivision of Public Health
- LHD.....local health department, district health department, public health authority
- LTAT.....Local Technical Assistance and Training
- NCALHDNorth Carolina Association of Local Health Directors
- Program StaffAll references to Program Staff refer to any of the individuals working in any of these DPH Sections: Chronic Disease and Injury, Environmental Health, Epidemiology, Office of Minority Health, Oral Health, State Lab, and Women’s and Children’s Health
- RFARequest for Application

3. RFAs

RFAs are required when Program Staff receives funds to be allocated using specific evaluation criteria, such as a particular geographic area.

IMPORTANT: When planning the RFA's timeline, the Program Staff needs to make sure that they will be making their decisions in time for the next annual Major Distribution.

The program's decisions about which LHDs will receive funding and how much they are to receive will need to be made quite early — the first draft AA is due between late August and October and the BE must be signed and delivered to the Contracts Office by the first week in December. Work on the AAs and BEs is done this early in order to have everything ready for the Major Distribution. That distribution will be for the following fiscal year's AAs, which will have June 1 start dates.

If an RFA is required prior to the distribution of funds to LHDs, the Program Staff will need to complete the RFA Approval form, the RFA Justification Memorandum, and the RFA Template.

These documents are located on the Contracts Office website, <http://publichealth.nc.gov/employees/contracts.htm>, and are accessed using the *Contract Forms* link located on the Contracts Office's front page. From the Contract Forms page, look under the *Request for Applications* section for the documents.

The Program Staff will secure the approval signatures on the RFA Approval form and submit the original documents — both on paper and as an electronic file — to the Contracts Office at least 30 days prior to the submission of the RFA.

The Contracts Office Staff will then review the RFA package for completeness and accuracy. If there are questions or suggestions on the RFA package, they will be directed to the appropriate Program Staff.

After securing the approval of the Budget Office, the Contracts Office Staff will then return the approved package to the appropriate Program Staff.

The Program Staff will then handle all aspects of the RFA mailing, evaluation and awarding of funds. The actual awarding of the funds to the LHDs will be by Agreement Addendum (and a corresponding Budgetary Estimate).

4. Requesting New Activity Numbers

An *Activity* is the term used to describe those programs and services that are initiated by DPH and provided by the local health departments. If an Activity number is not already assigned, a new one will need to be issued.

When a new Activity number is needed, the Program Staff should contact the AA Team Leader at adrienne.gilliatt@dhhs.nc.gov. Provide the AA Team Leader with information including:

1. The proposed title of the Activity
2. The month the Activity is estimated to start
3. Whether this will be an on-going or one-time Activity
4. Who is to be the AA Team Leader's program contact for the Activity.

Activity numbers and titles should be consistent on all AA documents and Aid-to-Counties database entries. Please note that the ATC database has a 26-character limit on Activity names so what gets entered into ATC may need to be abbreviated. What appears on the AA itself should not be abbreviated. (As all DPH sections have Activities, it is best to use a name which makes it clear what work is involved. For example, more than one DPH section has had work using the acronym "REACH," so using only that acronym isn't sufficient for knowing which Activity it is.)

The AA Team Leader will assign a number and title for the new Activity, and will send an email message to the Budget Office and the requesting Program Staff person (with a copy sent to the Budget Office's ATC

Coordinator, the Encumbrance Officer, and the Contracts Manager) to request that that the new Activity be set up and added to the Aid-to-Counties database.

Once the Budget Office has completed setting up the Activity, they will notify the Program Staff person and the Contracts Office (via the same email message by selecting the *Reply All* button) that the Activity is now available to use. Once notified by the Budget Office, the Program may enter the Budgetary Estimate information in the ATC database (see *Process for Budgetary Estimates* on page 11 for more information).

5. ATC Window — Restrictions on When Users Enter Data in ATC

All DPH Staff — Program, Contracts and Budget — have approximately two weeks per month in which to access the ATC database for the purposes of entering data. The two week “window” occurs on about the last week and the first week of each month. (All other times, the ATC database is accessible but changes cannot be made.)

This window is the only time that Program Staff can create Budgetary Estimates or enter any data. This same window is when the Budget Office can certify BEs, and is the only time when the Contract’s Office can release funds for executed AAs and AA revisions.

The rest of the calendar is divided into other windows for the local health departments and for the Controller’s Office to enter data. The LHDs’ window begins once the DPH Staff’s window closes, around the second week of each month, with an open window for about one week. This is when the LHDs submit their expenditure reporting. Then the window shifts to the Controller’s Office for them to prepare and process the payments to the LHDs. After the Controller’s Office’s window closes, the process starts again with the DPH Staffs’ window opening.

This system of windows was implemented to remedy the problem that existed in which funds were drawn by LHDs at the same time that the same funds were being reduced by Program Staff. These situations resulted in negative balances. To prevent negative balances from occurring, the ATC database now includes this system of allocating write access to only one set of users at a time. All users of the system can *view* the data at any time. It is only when making changes that the users are limited — data entry requires the users’ window to be open.

All users need to be mindful of when they can and cannot enter data. If BEs are submitted late and cannot be certified by the Budget Office during the DPH Staff’s open time, it may impact the AAs start date requiring it to be delayed by a month. This also means that the BE may be rejected if the dates entered need to be changed.

As the Contracts Office can release funds only during the DPH Staffs’ window, if the LHDs delay getting their signed AAs mailed in, it may delay the LHDs’ access to the funds.

The Budget Office will need to certify BEs timely and return them promptly to the Contracts Office so the AA+BE or AA+Supplement+BE can be sent to LHD in a timely manner.

The Contract’s Office will keep all items it receives during the lockout time period. Once the ATC database window is open again for DPH Staff, all funds for executed AAs received will be released, and any BEs being held will be given to the Budget Office for certification.

The Controller’s Office develops the window dates schedule for each calendar year. The current schedule is included in *Appendix E: Aid-to-Counties Expenditure Control Schedule* for your reference and it is also available on the Contracts Office website, with all other related documents under the heading *Agreement Addendum*.

6. Supplement Pages — Federal Grant Requirements

Federal grant awardees (such as DPH) are now required to provide additional information to the subawardees (such as the LHDs) about the source of their agreements' funding. (The details about this requirement are contained in the comprehensive guidance for federal award programs, released by the Office of Management and Budget (OMB) on December 26, 2013, which is commonly referred to as the "Omni-Circular.")

Much of the required information is found on the Notice of Grant Awards (NGAs) and Notice of Awards (NOAs) that DPH receives throughout the year. As we release our agreements on the state fiscal year cycle and the NGAs and NOAs are not on any one cycle, DPH is not able to include this information on the AAs themselves. Instead, language is added to the AAs (in the Funding Guidelines section) referring to Supplement pages, with the required information listed on the Supplement pages.

What is a Supplement page?

A Supplement is a single page which enables DPH to provide to the LHDs all the required information about the federal grant award:

- Subrecipient name *
- Subrecipient DUNS number
- Subaward period of performance start and end dates *
- Federal Award Identification Number (FAIN)
- Federal award date
- Federal award project description
- Name of federal awarding agency; Pass-through entity * ; DPH contact info for awarding official *
- CFDA number and name
- Whether the award is research & development
- The indirect cost rate for the federal award
- Amount of federal funds obligated by this action
- Total amount of federal funds obligated to the subrecipient
- Total amount of the federal award

* This information appears on the AA or AA Revision.

To reduce the quantity of pages produced, we've designed it so all 85 LHDs are displayed on one Supplement page.

The Program Staff are to complete one Supplement page for each federal grant award year (as funds are by year) in line with the budget that the Program Staff has produced for distributing the federal grant funds. Those who have grants funding their AAs will have part of two award years making up the single 12-month AA — so ultimately there will be (at least) two Supplement pages per AA for FY18.

In addition, if the AA is funded with two (or more) different federal grants, the Program Staff will need to produce Supplement pages for each grant.

If there are changes during the fiscal year, and amounts of federal funds allocated to the local health departments changes in any way, this will necessitate additional Supplement pages being produced.

A Supplement page is specific to a single FY and a single Activity, and each is numbered, starting with Supplement 1 (to be able to distinguish between them).

Language in every AA which references the Supplement pages

Starting with the FY17 AAs, all AAs include this reference to the Supplement pages — whether federally funded or not. This language is added as the first information in Section VI, appearing in front of any other language which may be written in the AA's funding section.

VI. Funding Guidelines or Restrictions:

1. Requirements for pass-through entities: In compliance with 2 *CFR* §200.331 – *Requirements for pass-through entities*, the Division provides Federal Award Reporting Supplements to the Local Health Department receiving federally funded Agreement Addenda.
 - a. Definition: A Supplement discloses the required elements of a single federal award. Supplements address elements of federal funding sources only; state funding elements will not be included in the Supplement. Agreement Addenda (AAs) funded by more than one federal award will receive a disclosure Supplement for each federal award.
 - b. Frequency: Supplements will be generated as the Division receives information for federal grants. Supplements will be issued to the Local Health Department throughout the state fiscal year. For federally funded AAs, Supplements will accompany the original AA. If AAs are revised and if the revision affects federal funds, the AA Revisions will include Supplements. Supplements can also be sent to the Local Health Department even if no change is needed to the AA. In those instances, the Supplements will be sent to provide newly received federal grant information for funds already allocated in the existing AA.

This reference language is to appear with numbered/lettered paragraphs and subparagraphs. The numbers and letters should be changed to make it match what the AA already uses (or the AA can be changed to match this). Any other language which appears in the AA's funding section also will need to appear with numbered/lettered paragraphs.

Providing Supplement pages to the LHDs

Supplement pages are to be attached to the AAs whenever it is possible. At the start for the upcoming fiscal year, DPH releases the AAs many months before their start dates and so it will often be the case that the federal grant information is not yet available when the AAs are being completed.

If the Supplement is included with the AA: The Supplement page should be placed between the AA and the BE, so it appears after the AA pages and immediately before the two BE pages.

Near the top of the form are two checkboxes which are used to indicate the reason for the Supplement. When including the Supplement with the AA, tick the checkbox for *In AA+BE or AA+BE Rev.*

If the Supplement can't be included with the AA: Those Supplement pages which aren't attached to an AA will need to be delivered to the LHDs in another manner. In this case, email the Supplement page as a Microsoft Word document to the Encumbrance Officer at rebecca.miller@dhhs.nc.gov. (The Encumbrance Officer will then send the Supplement pages to the LHDs.)

Near the top of the form are two checkboxes which are used to indicate the reason for the Supplement. When the Supplement is to be sent without an AA, tick the second checkbox and choose one from among the five options provided beside the second checkbox.

The Program Staff will need to be cognizant about getting these Supplement pages to the Encumbrance Officer when the NGAs and NOAs arrive — the arrival of these awards are the only reminder for the Program Staff that these pages need to be produced.

7. Process for CAs, AAs, and BEs — Major Distribution

DPH is required to have all the Agreement Addenda and Budgetary Estimates to all 85 LHDs before February 15 each year. The Program Staff, Contracts Office and Budget Office must work together in the months leading up to that date in order to meet that legislative deadline.

Process for Consolidated Agreements

Consolidated Agreements are the master agreements for the local health departments, and a new Consolidated Agreement is executed each fiscal year. A Consolidated Agreement is an agreement entered into by one local health department and the Division of Public Health.

In October, the draft Consolidated Agreement is distributed by the LTAT Branch Head to a group of people — specific individuals within Program, Budget, Contracts, the LTAT Administrative Consultants, and the Controller’s Office — for their review. Those individuals are to provide all their comments to the LTAT Branch Head by the end of November.

The LTAT Branch Head will produce a final draft Consolidated Agreement incorporating the needed changes and present it in mid-December to the NCALHD. Any issues raised by the NCALHD will be reviewed by the Division Management Team, and final modifications will be made to the agreement resulting in a final Consolidated Agreement.

By mid-January, the Consolidated Agreement, along with other associated documents (Business Associate Agreement, State Certifications, Federal Certifications, instructional memo, training forms, Maintenance of Effort schedule), will be printed by the LTAT Staff and delivered to the Contracts Office along with all the other agreements needed by mid-January as part of the Major Distribution.

In mid-January, the LTAT Staff will also email to the Contracts Office a master PDF file of the Consolidated Agreement and its associated documents so the file can be posted on the Contracts Office website.

Process for Agreement Addenda

First drafts due

All drafts of the Agreement Addenda are reviewed by the AA Team Leader, beginning in late August.

Each Activity is assigned a due date for its first draft (v1 draft), with due dates staggered from late August through October, distributed equitably among the Sections.

The proposed v1 draft due dates will be emailed to Program Staff by the third week in June by the AA Team Leader. If the due date proposed conflicts with other work priorities, Program Staff needs to contact the AA Team Leader by the end of June to arrange for a different v1 draft due date. After the first week of July, the due dates are set.

The AA Template can be obtained (along with other Agreement Addenda-related documents) at the Contracts Office website, using the Contract Forms link found on the front page. The URL for the Contracts Office is <http://publichealth.nc.gov/employees/contracts.htm>. When on the Contract Forms page, look under “Agreement Addendum” to find the documents to download.

Service Period and Payment Period dates

Almost all Original AAs use June 1 – May 31 for the Service Period per the legislature’s mandate. Payment Period dates are *always* one month after the Service Period dates (so most are July 1 – June 30). The Budget Office requires that period dates begin on the first day of a month and end on the last day of a month. (The only exceptions about the dates policy are for the start and end of a federal grant.)

Review process between Program Staff and Contracts Office

The review process between the AA Team Leader and the Program Staff will use Microsoft Word's track changes and comments features.

A single draft is reviewed at a time. If Program has more than one variation for an Activity's AA, the first variation needs to be declared as the final version before taking up subsequent variations. Changes made on the first one should then be applied to those subsequent variations *before* their reviews begin.

Changes — that is, changes to the language and formatting — are proposed in the draft itself and any changes deemed acceptable are to be accepted (that is, accepted using the track changes feature in the software) prior to the next draft being submitted.

Comments — questions or statements made outside of the AA language and which appear as comments in the Microsoft Word document — are made in the draft and should be addressed by the Program Staff by adding additional comments. (Please do not add comments into the existing comment box. Instead, add a new comment box.) In this manner, issues or questions are resolved quite efficiently.

Naming convention for AA drafts

The AA file names must include the Activity number and the fiscal year for that AA. The first draft from the Program Staff is labeled as v1, with changes and comments from the AA Team Leader appearing as changes and comments to the v1 draft. Subsequent drafts are numbered accordingly, with v2, v3, and so on, until a final draft is reached. These file names will also include the first name (or initials) of the person who worked on the draft. The resulting file name will look like this: *123 FY18 v1 claire*. The file name for the response to this v1 draft will look like this: *123 FY18 v1 ag* (with *ag* being the AA Team Leader's initials). In this way, it will be simple to follow the progression the draft has gone through on its way to a final draft.

Once the Program Staff has received feedback indicating that the AA draft can be considered final, it is then ready for combining with the Supplement pages and the Budgetary Estimate — as soon as the Budgetary Estimate is certified. When the BE is certified, AA+Supplement+BE documents are combined into a single set, one for each local health department, and delivered to the Contracts Office. For the Major Distribution, this delivery will be two sets of each as paper copies. All other times of the year, this delivery will be as PDF files via email to the AA Team Leader. See *Producing AA+BE and AA+Supplement+BE Documents* (on page 12) for more information on this process.

Presenting Agreement Addenda to the Core Public Health Committee (formerly the Liaison Committee)

Some Agreement Addenda have an extra step in the process — they are presented to the Core Public Health Committee for their approval. Prior to this presentation, those Agreement Addenda must have had their review completed by the AA Team Leader.

The Program's Branch Head determines whether a particular Agreement Addendum needs to be presented to the Core Public Health Committee. Reasons for presentation include having a new Activity and when major changes to the Agreement Addendum have been made.

The meeting allows the Core Public Health Committee to review and comment on any proposed changes to the Agreement Addendum. If the Core Public Health Committee makes any meaningful changes to the Agreement Addendum, the Program Staff must inform the AA Team Leader about those changes.

Process for Budgetary Estimates

Budgetary Estimates data is entered into the Aid-to-Counties database by the Program Staff with enough time so that the printed Budgetary Estimate pages can be signed and dated by the Program Administrator and Section Chief, and then delivered to the Encumbrance Office no later than the first Friday in December. The BEs for the next fiscal year can be produced, signed and delivered as early as the second Friday in November.

Be aware that by system design, you are limited on which days each month you are able to enter data into the ATC database. For more information about this, please read the *ATC Window — Restrictions on When Users Enter Data in ATC* section which starts on page 7.

When entering a Budgetary Estimate that is federally funded into the Aid-to-Counties database, please ensure the following fields are completed: CFDA title and number, award name and number, award year, Research & Development, and name of Federal agency.

Program Staff enters all necessary information into the Aid-to-Counties database, ensuring that:

- The Service and Payment Dates are the same as the AA's Service and Payment Dates
- It indicates an AA is required for each local health department that is receiving an AA
- The BE's printed pages are legible and printed in black and white

IMPORTANT: If this deadline is missed (the first Friday in December), the Budget Office cannot guarantee the funds will be allocated in time for the Major Distribution which is mailed mid-February.

The Encumbrance Officer processes the BEs, signs and dates them, then delivers the BEs to the Budget Officer. Once the Budget Officer has completed all steps in preparing the budget for the current and future budget years, the Budget Officer and Budget Supervisor certify the BEs in the Aid-to-Counties database, then both sign and date the paper BEs. The Budget Officer then creates a PDF file from the fully certified paper BE, and emails that PDF file to the Encumbrance Officer, who then emails the PDF file to the Program Staff.

Once the Program Staff has received the fully signed BE from the Encumbrance Officer, the Program Staff can create the AA+BE documents needed for the Major Distribution.

Producing AA+BE and AA+Supplement+BE documents

Agreement Addenda almost always have a corresponding Budgetary Estimate, and these two items are always delivered as a unit — referred to as an AA+BE — to the local health departments. As we are now required to provide more information about the federal grant to the LHDs, this unit might include the Supplement pages, too, which will make some of these AA+Supplement+BE documents.

For the Major Distribution, the local health departments receive paper AA+BE and AA+Supplement+BE documents, with each Activity stapled together. For the rest of the year, they receive the AA+BE AA+Supplement+BE documents via email as a single PDF file.

Paper AA+BE and AA+Supplement+BE sets have the AA in front, Supplement pages next, and the last two pages as the two BE pages. In cases where there are Attachments to the AA, these Attachments will appear at the end of the AA pages.

Local health departments are to receive two sets as they must return two signed sets to the DPH Contracts Office. When the Program Staff delivers the paper sets for its Activity, a single *master* set also should be included. If all LHDs are receiving identical AAs, there will be a single master set. If each LHD will get a different AA for that Activity, there will be a master set for each unique AA.

Electronic AA+BE and AA+Supplement+BE files follow the same page order as the paper sets: AAs in front, any Attachments next, then the Supplement pages, and the two BE pages at the end. A single PDF file is created for each LHD to receive the Activity's AA.

Naming Convention for the AA+BE and AA+Supplement+BE files:

When naming the PDF file, write the Activity's number, the fiscal year, and the county's name — in that order. If the PDF file is an AA revision, that information would appear next to the Activity number. The goal is to keep the names short but descriptive. The LHDs are receiving many of these files so this naming convention helps them. File name examples: 101 FY17 Appalachian; 551 rev#1 FY18 MTW.

8. Declining and Terminating Agreement Addenda

LHD declining an Agreement Addendum

Once an Agreement Addendum has been sent to the LHD and if it has not been signed and returned to DPH, the LHD has the option of declining the AA. To do so, the LHD's Health Director can provide either a letter or send an email message stating that the LHD is declining the Agreement Addendum.

The letter or email message is to be sent by the LHD's Health Director to the DPH Program Contact (the person named on the AA itself), and should include the reason the LHD is declining to participate in the Activity. (Once the AA has been signed, it can no longer be declined, but instead would need to be terminated. See *Terminating an Agreement Addendum* on page 13 for more information.)

Once this letter or email message is received, it needs to be given to the AA Team Leader so the AA's status can be updated. The AA Team Leader will advise the Program Staff whether what has been received is sufficient for declining an AA, and if so, the Program Staff can then credit funds that had been allocated to that LHD in the Aid-to-Counties database (and reallocate them as appropriate). (If the funds are to be allocated to another LHD, the LHD receiving additional funds will need to receive an AA revision. See the *Revisions to AAs and BEs* section beginning on page 14 for more information.)

Terminating an Agreement Addendum

A need may arise to terminate an Agreement Addendum which has already been signed and returned by the LHD. This may be due to circumstances with DPH or with the LHD.

If the termination is initiated by the LHD, the LHD will need to submit a letter signed by the LHD's Health Director to the DPH Program Contact (as identified on the AA) that explains why the LHD is unable to fulfill the AA requirements and includes the requested termination date.

If the Program is in agreement to mutually terminate the AA, the Program Staff must provide the Contracts Manager with a copy of the LHD's request for termination.

The Contracts Manager will draft a mutual termination letter for the Program's review and input. The Contracts Manager will then submit the final version of the mutual termination letter to the DPH Deputy Director for signature. The signed termination letter will be sent via email and certified mail to the LHD's Health Director by the Contracts Office.

The Program Staff and the AA Team Leader will be copied on the email, and the Program Staff, upon receipt of the DPH termination letter, will credit the funding in the Aid-to-Counties database. (If the funds are to be allocated to another LHD, the LHD receiving additional funds will need to receive an AA revision. See the *Revisions to AAs and BEs* section beginning on page 14 for more information.)

If DPH is initiating the termination, the Program Staff will need to provide to the Contracts Manager all the pertinent information about the termination, including all correspondences with the LHD.

The Contracts Manager will draft a termination letter to suit the needs of the situation, and will submit the draft letter to the Program Staff for its review and for the addition of any needed closeout procedures.

Once the Contracts Manager and the Program Staff have agreed upon the contents of the letter, the letter will be sent to the DPH Deputy Director for signature. The signed termination letter will be sent via email and certified mail to the LHD's Health Director by the Contracts Office.

The Program Staff and the AA Team Leader will be copied on the email, and the Program Staff, upon receipt of the DPH termination letter, will credit the funding in the Aid-to-Counties database. (If the funds are to be allocated to another LHD, the LHD receiving additional funds will need to receive an AA revision. See the *Revisions to AAs and BEs* section beginning on page 14 for more information.)

9. Revisions to AAs and BEs

Changes to the Original AA needed before the Original AAs are mailed

If Program Staff has changes to make to the Original AA before the Original AAs are mailed by the Contracts Office, Program Staff will need to contact the AA Team Leader for instructions as soon as possible. It may be possible to *replace* the Original AA with a new one prior to the Major Distribution.

If the Original AA is to be replaced, a draft AA will need to be submitted to the AA Team Leader indicating the changes from the prior Original AA which had already been approved. The draft will go through the same review process to get it to a final version.

If there is not enough time to replace the Original AA, a revision to the AA will need to be drafted.

Revisions to the Original BE

Any change in funding amounts for an Activity which requires a revised BE also requires a revised AA.

Before an Activity's BE can be revised, that Activity's original BE (and all prior BE revisions, if any) must have been certified by the Budget Office in the ATC database.

For Activities in the current fiscal year

The Budget Office will certify BEs only if the funds are available to do so. This means that, for federally funded Activities, the federal grant notice (an NGA or NOA) must have been received by the Budget Office.

If the funds are available, the Budget Officer and Budget Supervisor will certify the BE within three business days (inside the DPH staff's ATC window) of receipt. If the funds are not available, the Budget Office will decline the BE and return it to the Encumbrance Officer, who will then notify the Program Staff that they will need to resubmit the BE once the funds are available.

For Activities in the next fiscal year

Any Budgetary Estimate revision which is delivered to the Budget Office after the first week in December will not be processed by the Budget Office until *after* its original Budgetary Estimate is processed.

BE Revision Service Period and Payment Period dates

IMPORTANT: All AA and BE revisions keep the original AA and BE dates in their headers. (AA revisions will specify dates for the revised language in the body of the AA revision.)

Revisions which add funds

1. Existing source of funding (existing center codes)
 - Add funds to the existing BE columns with the existing dates
2. New source of funding (new center codes) — this is rare
 - Add funds to a new BE column

Revisions which reduce funds

1. Existing source of funding (existing center codes) — Reduce funds to the existing BE columns with the existing dates

Revisions to the Original AA

Much of the process for AA revisions is the same as the process for original AAs. A first draft (v1) of the AA revision is emailed by the Program Staff to the AA Team Leader using the AA template.

The only significant difference between the original AA and an AA revision is that for an AA revision, the language on the revision should *reflect only what has changed* from the original AA. All sections are listed in the AA revision and for each section with no changes, "No change." is written below the section heading. Most often,

it is only the Purpose section and the Scope of Work and Deliverables section with revision language. The Purpose section describes the purpose for the revision in a broad manner and the Scope of Work section describes the specifics, such as additional work the local health department is to perform.

When funds are added to an Activity later in the fiscal year, it is almost always accompanied by additional services that the local health department will need to perform. As these services will be performed by the local health departments in future months, the service period's date range *for those additional services* will be stated in the AA revision's Scope of Work and Deliverables section itself, ahead of the added work's description.

The AA Template can be obtained at <http://publichealth.nc.gov/employees/contracts.htm>, which is the Contracts Office website. From that page, click the Contract Forms link, then look under "Agreement Addendum" to find the document to download.

Just as with the original AA review, the review process for the AA revision is between the AA Team Leader and the Program Staff, using Microsoft Word's track changes and comments features. (See *Review process between Program Staff and Contracts Office* starting on page 11 for more information.)

The first draft from the Program Staff is labeled as v1, with changes and comments from the AA Team Leader appearing as changes and comments to the v1 draft. Subsequent drafts are numbered accordingly, with v2, v3, and so on, until a final draft is reached. Changes — language and formatting in the AA revision — are proposed in the draft and any changes deemed acceptable to the Program Staff are to be accepted (that is, accepted using the track changes feature in the software) prior to the next draft being submitted.

Comments — questions or statements made outside of the AA revision's language and which appear as comments in the Microsoft Word document — are made in the draft and can be addressed by the Program Staff by adding additional comments. (Please do not add comments into the existing comment box. Instead, add a new comment box.)

Once the Program Staff has received feedback indicating that the AA revision's draft can be considered final, it is then ready for combining with the Budgetary Estimate — as soon as the Budgetary Estimate is certified. When the BE is certified, AA+BE (or AA+Supplement+BE) documents are combined into a single PDF file, with one file produced for each LHD. These PDF files and one completed QA Checklist are emailed by the Program Staff to the AA Team Leader, for the AA Team Leader to release to the LHDs. (More information about AA+BE and AA+Supplement+BE files, including how to name the file, can be found under *Producing AA+BE and AA+Supplement+BE Documents* starting on page 12.)

AA Revision Service Period and Payment Period dates

Almost all original AA Service Period dates are June 1 – May 31 with Payment Period dates one month later, July 1 – June 30, per the legislature's mandate. The AA revision's Service Period and Payment Period dates listed in the document's header will match the dates of the original AA.

As stated above, additional services to be performed by the local health department will be listed in the AA revision's Scope of Work and Deliverables section. The opening paragraph of this section will include a statement specifying the service period's date range for that added work or the date that the new language is to be made effective (such as "As of October 1, 2017...").

Exceptions to these rules require the Contracts Manager's approval. In order for the Contracts Manager to determine whether an exception is warranted, include the reason for the exception in the email message accompanying the draft AA revision.

AA and BE Revision Numbers

AA revision numbers are consecutive, with the original AA assigned the revision number zero (0). BE revision numbers are assigned automatically by the Aid-to-Counties database, with the initial BE assigned the revision number zero (0). The AA and BE revision numbers are unrelated.

It is always the case that the original AA given to an LHD will be revision number zero. In cases where an LHD receives an Activity's AA after all other LHDs receive the same AA, the AA revision number for that later sent original AA will still be revision number zero.

It is not necessary for every LHD which received an original AA to also receive a revision. This means that a subsequent revision could have different AA revision numbers depending upon whether particular LHDs received the earlier revision. For example, a specific revision for a particular Activity sent out to several LHDs could be a revision #3 for some of them and a revision #2 for others.

The BEs reference the AA revision numbers. So for a specific BE, one needs to use the appropriate AA revision number that is specific to the particular LHD receiving it.

Unexpended ATC grant funding — same grant year

A single federal grant year always resides over two state fiscal years, and so that means that the federal grant year resides over two AAs. If an LHD does not spend all their federal funds in a prior AA, the Program Staff may want to “move” the funds to the new AA. It may not be possible to move these funds into the new fiscal year's AA due to these timing issues:

- If the Budget Office is in the process of closing the current budget year and opening the next budget year.
- The date that the federal grant year ends — if your grant year ends in July or August, it is likely impossible to get the revised AA+BE completed and out to the LHD before that grant year ends.

To prevent the need to move unexpended funds, it is best to split the funding into the two AAs at the start rather than assuming that the funds can be moved later. For example, if your grant year runs October 1 to September 30, then eight months of funding are allocated in the first AA and four months in the second AA. If your grant year runs July 1 to June 30, then eleven months of funding are allocated in the first AA and one month in the second AA.

If Program Staff intends to move unexpended funds, the steps are the same as for any other revision.

AA Revisions during the period March 1 through April 30

Per Dennis Harrington's memo dated March 8, 2006:

Before awarding funds to the local health departments, DPH Program Staff must inform the local health departments of the funds availability and obtain its approval to accept the new funds before allocating the funds in the Aid to County Database. Program staff are to notify local health departments of the funding opportunities via e-mail and shall copy the appropriate Administrative Consultant(s). Program staff shall ensure the Administrative Consultant(s) are informed of the local health department's decision to accept or reject the funding. DPH Program Staff can utilize the local health department's Liaison Committee as long as there is representation for all of the impacted local health departments. Otherwise, DPH Program Staff are required to directly communicate with each impacted local health department. (Note: DPH Program Staff shall not utilize the List Serve to broadcast funding opportunities to the local health departments.)

If an AA revision is needed during the period March 1 through April 30, the Program Staff must take these extra steps:

1. Inform the LHDs of the funds availability.
2. Obtain approval from each LHD — from the Health Director and Finance Officer — that they can accept the new funds at this late date before allocating the funds in the ATC database.

3. Include the appropriate Administrative Consultant on all correspondence with the LHDs about the funds availability.
4. Act quickly on allocating funds in the ATC database, producing the program-signed BE as soon as possible, delivering it to the Encumbrance Officer for processing.
5. Act quickly on producing the v1 draft of the AA revision, sending it to the AA Team Leader for review. Include information about the LHDs' approval of receiving these funds at this late date.

Providing adequate notification and obtaining the local health department's prior acceptance of new or reallocated funding before making awards will allow local health department's to utilize funding more efficiently.

If you have any questions regarding this process, please contact Jeneen Preciose at 919-707-5144 or jeneen.preciose@dhhs.nc.gov.

10. Original AAs Starting After Fiscal Year's Start

New Activity beginning after June 1

A new Activity can begin at any time during the year, not just on June 1. Those Activities which begin on June 1 must be part of the Major Distribution and must follow the process listed in this guide's Section 3 *Process for Agreement Addenda* (which begins on page 10).

Activities beginning on July 1 or later will follow a similar process for producing the AAs and BEs, but will not follow the Major Distribution timeline. One major difference for these later-starting Activities is that their Budgetary Estimates will be certified by the Budget Office only after the grant award has been received and budgeted. As Service Period dates must be for dates in the future, this BE certification method may delay the Program's intended start date.

For Activities beginning July 1 or later, the first draft will follow the standard AA review process (Review process between Program Staff and Contracts Office starting on page 11), and once the process is complete, it will follow the method for producing electronic AA+BE and AA+Supplement+BE files (described in the *Producing AA+BE and AA+Supplement+BE Documents* section starting on page 12.)

The Service Period will begin on the first day of the month and can end on the last day of any future month within the fiscal year. If the Service Period ends on a date other than May 31, it is because the Activity is ending permanently, such as when the federal funding ends and will not be renewed. The Payment Period's dates will start and end the month after the Service Period's dates.

The AA and the BE will have the same Service Period and Payment Period dates.

Additional LHDs added to an Activity after other LHDs have already started work

In instances where an LHD joins an Activity one or more months after it has begun with other LHDs, the newly added LHD will receive a very similar original AA as was sent to the other LHDs.

As the Budget Office requires that the BE contain only one date range per center code, the funds being added to the Activity for the new LHD will need to be added to that already existing date range (column). Therefore, the mention of the actual later start date for the Service Period will appear in the *body* of the AA rather than in the AA's header. This is because the dates in the AA's header must match the dates from the BE.

11. Step-by-Step Process for Major Distribution

The Major Distribution is the undertaking where the Programs, the Contracts Office, and the Budget Office work together to produce the Consolidated Agreement (CA) and almost all of the Agreement Addenda (AAs) for the coming fiscal year, and deliver all of those agreements to all of North Carolina's 85 local health departments. All these agreements are executed by the local health departments and returned to DPH, and those agreements which require it (CA, negotiable AAs) are then counter-signed and returned to the local health departments before the fiscal year begins. Once the agreements are executed and the Budget Office has approved the release of the funds, the funds for these agreements are released in the Aid-to-Counties database and Funding Authorizations are distributed for approval by the local health departments.

Step 1: Propose and assign due dates for first drafts of the Agreement Addenda

— By June 20, July 1, and July 5

- A. By June 20, the AA Team Leader sends an email message to the Program Staff — the contact person for each Activity — with proposed due dates for the upcoming fiscal year's v1 draft AA.
- B. By July 1, the Program Staff — the contact person for each Activity — replies to the email message for his or her specific Activity indicating that the proposed due date is acceptable or suggesting a different v1 draft AA due date.
- C. By July 5, the AA Team Leader sends out follow-up email messages to all those same Program Staff contacts, with copies to the appropriate Section Operations Managers, listing the assigned v1 draft AA due dates for each Activity.

Step 2: Request and provide information about the Activities

— By the 4th week in August

- A. The AA Team Leader sends an email message to the Program Staff requesting information about each Activity for the upcoming fiscal year. The request asks:
 - Whether the Activity will be active during the upcoming fiscal year?
 - Whether the Activity will be presented to the Core Public Health Committee?
 - If so, will it be presented in October or November?
 - For confirmation that the Activity will have its final paper copies delivered in time* to meet the Mandate (* "in time" is to the Contracts office by the third Friday in January)
- B. The Program Staff provides requested information via an email message to the AA Team Leader about the Program's Activities. The information provided includes:
 - Whether the Activity will be active during the upcoming fiscal year
 - Whether the Activity will be presented to the Core Public Health Committee
 - If so, whether it will be presented in October or November
 - A statement that the Activity will have its final paper copies delivered in time* to meet the Mandate (* "in time" is to the Contracts office by the third Friday in January)
- C. If the information provided changes in the coming weeks, the Program Staff should apprise the AA Team Leader of the changes.

Step 3: Submit first draft of Agreement Addenda for review

— *In August, September, and October with assigned due dates*

- A. The Program Staff emails the first draft of the AA to the AA Team Leader.
- B. The draft AA is to be delivered with sufficient time for a review so the final draft will be ready in time for the Core Public Health Committee meeting and so that all AAs will be completed in time for the Major Distribution. Early draft submissions are encouraged.
- C. The review process between the AA Team Leader and the Program Staff will use Microsoft Word's track changes and comments features.
- D. The draft files are named with this convention: Activity Nbr | FY | draft version nbr | first name. Examples: 123 FY18 v1 jaime; 456 FY17 v2 claire.
- E. The receipt of each draft AA, along with other relevant information, will be included by the AA Team Leader in the AA Log.

Step 4: Reach final draft of the Agreement Addenda

— *By September – December*

- A. The review continues with as many drafts as necessary until both parties agree upon a final version.
- B. The Program Staff sends an email to the AA Team Leader to acknowledge the final draft AA.
- C. This final draft will be ready for presenting by the Program to the Core Public Health Committee.
- D. The date that the draft AA is finalized will be included in the AA Log by the AA Team Leader.

Step 5: Present Agreement Addenda to the Core Public Health Committee

— *In October and November*

- A. The final approved draft of the AA is presented by the Program Staff (Branch Heads) to the Core Public Health Committee. The meeting allows the Core Public Health Committee to review and comment on any proposed changes to the AA.
- B. If meaningful changes are required by the Core Public Health Committee, the updated draft AA will need to be emailed to the AA Team Leader to initiate another review process. In the email message, the Program Staff is to state that the changes are needed due to the Core Public Health Committee's review.

Step 6: Review Consolidated Agreement draft

— *By the end of October*

- A. The draft Consolidated Agreement is distributed by the LTAT Branch Head to the Programs, Budget, Contracts, LTAT Administrative Consultants, and the Controller's Office for their review.
- B. The draft is delivered with sufficient time for a review so the final draft will be ready for the NCALHD meeting held in mid-December.

— *By the end of November*

- C. Those who received the draft Consolidated Agreement — Program Staff, Budget Office, Contracts Office, LTAT Administrative Consultants, and the Controller's Office Staff — return their draft CAs with their comments and changes to the LTAT Branch Head.
- D. The LTAT Branch Head will interpret and research all comments and proposed changes for the CA, contacting the reviewers as needed to gain clarification. The updates get incorporated by LTAT

Branch Staff into a single document which will be presented to the NCALHD at their mid-December meeting.

— *At the mid-December NCALHD meeting*

- E. LTAT Branch Head presents the proposed changes from the prior fiscal year's Consolidated Agreement to the NCALHD.
- F. Issues raised by NCALHD will be reviewed and resolved by the Division Management Team.
- G. LTAT Branch Head will then modify the CA based on results of NCALHD meeting.
- H. The final draft of Consolidated Agreement, as approved by all parties, is then to be emailed by the LTAT Staff to the AA Team Leader.

Step 7: Enter and approve Budgetary Estimates data in the ATC database

— *By the 1st Friday in December*

- A. Program Staff enters all necessary information into the Aid-to-Counties database.
 - The BE's Service and Payment Dates must be the same as the AA's Service and Payment Dates
 - The BE must indicate that an AA is required. The initial BE and the initial AA are each given the revision number zero. (The ATC database assigns the BE revision numbers.)
 - For BEs with federal funds, ensure that all federal grant information is entered.
 - Program Administrator reviews and approves the information entered into the ATC database.
- B. Program Staff provides Program Administrator and Section Chief with the printed BE (obtained from the ATC database) and acquires their signatures on the page.

Step 8: Deliver Budgetary Estimates

— *By the 1st Friday in December*

- A. The original program-signed BE is then delivered by the Program Staff to the Encumbrance Officer.
 - The printed pages must be legible, and printed in black and white.

IMPORTANT: If this deadline is missed, the DPH Budget Office cannot guarantee that the BE will be certified in time for the Major Distribution which is mailed mid-February.

Step 9: Process and approve Budgetary Estimates by the Encumbrance Officer and Budget Officer

— *By the 1st Friday in December*

- A. Encumbrance Officer processes, signs and dates the BEs, adds a new entry into the BE Log for them, then delivers them to the Budget Officer.

— *As BEs are processed...*

- B. The Budget Officer reconciles the BE against the budget, certifies the BEs in ATC.
- C. The Budget Supervisor certifies the BEs in ATC.
- D. The Budget Officer stores the original signed BE pages in the Budget Office's permanent files and emails a scanned copy of the fully signed BEs to the Encumbrance Officer.
- E. The Encumbrance Officer processes the BEs, updates the BE Log, and then emails the fully signed BEs to Program Staff for them to attach it to the appropriate AA.

Step 10: Deliver printed Agreements, Memos, and Forms to the Contracts Office; Email PDF files

— *By the 3rd Friday in January*

- A. The LTAT Staff delivers the following items to the AA Team Leader, one set for each LHD:
 - 1. One instructional memo addressed to the LHDs' Health Directors which will include specific instructions for the return of required documents and a list of major changes from the previous year
 - 2. Two copies of the Consolidated Agreement, which includes the Business Associate Addendum, the State Certifications, and the Federal Certifications
- B. The LTAT Staff creates a master copy (all pages) into a single PDF file, then emails it to the AA Team Leader. This master Consolidated Agreement file will be made available on the Contracts Office website.
- C. The receipt date of the completed documents is added by the AA Team Leader to the AA Log.
- D. The Program Staff will deliver the Agreement Addenda to the AA Team Leader:
 - 1. One master copy for each Activity (one for each variation in the Activity's AA) with the Supplement pages (if the information is available) and the BE attached, and labeled as the master copy
 - 2. Two copies of Agreement Addendum (AAs+BEs or AA+Supplement+BE, stapled) for each LHD, keeping the two copies for each LHD together, with the stack in alphabetical order by LHD name
- E. The receipt date of the completed documents is added by the AA Team Leader to the AA Log.
- F. The Program Staff will email to the AA Team Leader one of each Supplement page.

NOTE: AA+Supplement+BE denotes an AA combined with its corresponding Supplement pages and BE pages. All of the AA pages are followed by the Supplement pages, with the two BE pages placed at the end. For paper, the AA, Supplement pages, and BE are stapled; for electronic copies, the AA, Supplement, and BE are in a single PDF file.

IMPORTANT: If you find that you need to change your original AA before the AAs are mailed out in early February, please contact the AA Team Leader for specific instructions as soon as possible. It may be possible to avoid having to create an AA revision.

Step 11: Mail CAs, AAs+BEs, memos, and forms mailed to the LHDs

— *By February 8*

- A. The AA Team Leader mails to each LHD:
 - 1. Instructional memo
 - 2. Consolidated Agreement (two copies)
 - 3. Training forms (from LTAT Branch)
 - 4. AAs+BEs, AAs+Supplements+BEs (two copies of each Activity)
 - 5. Verification memo listing the envelope's contents (each LHD receives a different set of AAs)
- B. The information about the mailing date and which LHD received which AA is added by the AA Team Leader to the AA Log.

Step 12: Receive LHD-signed CAs from the LHDs

— *As agreements are signed by LHD and mailed back...*

- A. AA Team Leader receives the LHD-signed CAs (two signed originals) from the LHDs and adds a Contracts Office date stamp to both original documents, and updates the AA Log about the receipt.

- B. The CAs are routed to the DPH Deputy Director for signature. Once signed, the DPH Deputy Director returns them to the AA Team Leader, and the AA Log is again updated.
- C. AA Team Leader makes a copy of the signed CAs and mails them to the Controller's Office, and updates the AA Log. (The Controller's Office has requested that they receive copies of the first and signed pages from each of the signed agreements only as they have a lack of document storage space.)
- D. The AA Team Leader places one of the original executed CAs in the Contracts Office files and the other original CA is set aside to mail to the LHDs at a later date.

Step 13: Receive LHD-signed nonnegotiable AAs from the LHDs

— *As agreements are signed by LHD and mailed back...*

- A. AA Team Leader receives the LHD-signed nonnegotiable AAs (two originals) from the LHDs and adds a Contracts Office date stamp to both original documents, and updates the AA Log about the receipt.
- B. The AA Team Leader then routes one of the original nonnegotiable AAs to the Program Staff for their permanent files.
 - For those Program Staff located on the Six Forks Campus, the documents are placed in the Contracts Office's section-designated pick-up bins. Program Staff located elsewhere in Raleigh have their documents sent via interoffice mail.
- C. The other original nonnegotiable AAs are stored in the Contracts Office files.

Step 14: Receive LHD-signed negotiable AAs from the LHDs

— *As agreements are signed by LHD and mailed back...*

- A. AA Team Leader receives the LHD-signed negotiable AAs (two originals) from the LHDs and adds a Contracts Office date stamp to both original documents, and updates the AA Log about the receipt.
- B. The AA Team Leader then routes both original AAs to the Program Staff.
 - For those Program Staff located on the Six Forks Campus, the documents are placed in the Contracts Office's section-designated pick-up bins. Program Staff located elsewhere in Raleigh have their documents sent via interoffice mail.

Step 15: Review and execute negotiable AAs

— *By May 23*

- A. Program Staff will review the negotiable AAs, working with the LHDs as necessary in order to come to an agreement about the details for the AA.
- B. The Program Staff signs to execute the negotiable AA, then returns both original documents to the AA Team Leader, keeping a copy for the Program's permanent files.
 - All negotiable AAs must be completed, signed, and returned to the AA Team Leader by May 23 in order to have them ready for mailing and delivered to all 85 LHDs before the AAs start date.
- C. The AA Team Leader then adds another Contracts Office date stamp to both original documents, and again updates the AA Log about the receipt.
- D. One of the original executed AAs is placed in the Contracts Office files and the other is set aside to mail to the LHDs.

IMPORTANT: DPH must return all the fully executed negotiable AAs to the LHDs before June 1, which is the start of the new fiscal year. To do so, the Program must get all of their negotiable AAs signed and to the Contracts Office by May 23.

Step 16: Mail fully executed CAs and negotiable AAs to the LHDs

— *By May 26*

- A. The AA Team Leader mails all the original fully executed CAs and original fully executed negotiable AAs to the LHDs for their files.

Step 17: Release funds in the ATC database for all executed AAs

— *In July, once the Budget Office has approved the funds release*

- A. The Encumbrance Officer updates the status to executed and releases the funding in the Aid-to-Counties database for all the executed AAs. Once this occurs, the funding is available to the LHDs.

Step 18: Release Budget Estimates to Funding Authorization status, mail Funding Authorizations to LHDs; Receive signed Funding Authorizations back from LHDs

— *During September*

- A. After the Division's budget is certified, the Funding Authorization Budget Officer releases the estimates to Funding Authorization status.
- B. After this certification, the Funding Authorization Budget Officer mails Funding Authorization pages to the LHDs for the Health Directors and Finance Officers to sign their approval.
- C. LHDs indicate acceptance of Funding Authorization by signing and returning the document to the Budget Office.

Appendix A: Agreement Addendum Template (for FY 2017–18)

Division of Public Health Agreement Addendum FY 17-18

Local Health Department Legal Name	DPH Section/Branch Name	
Activity Number and Description	DPH Program Contact (name, telephone number with area code, and email)	
Service Period	DPH Program Signature (only required for <u>negotiable</u> agreement addendum)	Date

Payment Period

- Original Agreement Addendum
 Agreement Addendum Revision # _____

I. Background:

II. Purpose:

III. Scope of Work and Deliverables:

IV. Performance Measures/Reporting Requirements:

V. Performance Monitoring and Quality Assurance:

VI. Funding Guidelines or Restrictions:

1. Requirements for pass-through entities: In compliance with 2 CFR §200.331 – *Requirements for pass-through entities*, the Division provides Federal Award Reporting Supplements to the Local Health Department receiving federally funded Agreement Addenda.
 - a. Definition: A Supplement discloses the required elements of a single federal award. Supplements address elements of federal funding sources only; state funding elements will not be included in the Supplement. Agreement Addenda (AAs) funded by more than one federal award will receive a disclosure Supplement for each federal award.
 - b. Frequency: Supplements will be generated as the Division receives information for federal grants. Supplements will be issued to the Local Health Department throughout the state fiscal year. For federally funded AAs, Supplements will accompany the original AA. If AAs are revised and if the revision affects federal funds, the AA Revisions will include Supplements. Supplements can also be sent to the Local Health Department even if no change is needed to the AA. In those instances, the Supplements will be sent to provide newly received federal grant information for funds already allocated in the existing AA.

Health Director Signature (use blue ink) _____ Date _____

Local Health Department to complete: (If follow-up information is needed by DPH)	LHD program contact name: _____ Phone number with area code: _____ Email address: _____
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Signature on this page signifies you have read and accepted all pages of this document.

Revised July 2016

Appendix B: Quality Assurance Checklist

Division of Public Health Agreement Addendum Quality Assurance Checklist

DPH Section/Branch Name

Activity Number and Description

- Original Agreement Addendum
 Agreement Addendum Revision # _____ (Please do not put the Budgetary Estimate revision # here.)

I have reviewed the above listed Agreement Addendum and certify the following:

- The **Background** provides understanding of problem(s) to be addressed and how it prevents goals of the program from being achieved. Complete in brief paragraph form.
- What is the primary goal of the program?
 - Gives an overview of what the problem is and explains why the service is necessary.
- The **Purpose** identifies the goals of the Activity and desired outcome of Agreement Addendum. Complete in brief paragraph form.
- The **Scope of Work** is in narrative form and should describe who, what, when, how and where.
- Identifies the target population and the number of clients or participants expecting to be served.
 - Who will receive/benefit from the service? (Population served or impacted.)
 - Identifies deliverables including activities, tasks and services with appropriate time frames.
 - How is the service provided?
 - Where is the work performed? (LHD, other location)
 - Include supporting references, if possible (e.g., General Statute, medical guidelines)
- Performance Measures/Reporting Requirements:**
- Define performance measures and indicators with benchmarks to be met. How will they be measured (Quantity? Quality? Timeliness? Effectiveness? Efficiency?). Explains what must be accomplished to give the desired result (i.e., performance measures that are specific, measurable, achievable, relevant, and time-bound).
 - Reporting requirements are in narrative form and include frequency, due dates, to whom the report goes, format and data source, etc.
- Performance Monitoring and Quality Assurance:**
- Brief explanation of how performance will be monitored, for example, site visits, reports, phone conference, and if applicable, program sub-recipient monitoring plan.
 - What are the consequences if performance is below expectations? (Example, request corrective action plan.)
- The **Funding Guidelines/Restrictions** section (if applicable) clearly identifies any limitations on the use of funds or requirements on pre-approval of selected expenditures.

Branch Head Signature

Date

Please deliver this completed Quality Assurance Checklist for each Activity number to the Contracts Office.

Revised July 2014

Appendix C: Sample Supplement

Federal Award Reporting Requirements for Pass-Through Agencies, 2 CFR § 200.331

FY18 Activity: 151 Family Planning

Supplement 3

Supplement reason: In AA+BE or AA+BE Rev -OR- -

CFDA #: 93.558 Federal awd date: 10/31/14 Is award R&D? no FAIN: 1502NCTAN3 Total amount of fed awd: \$ 5,023,917

CFDA name: Temporary Assistance for Needy Families	Fed award project description: Temporary Assistance for Needy Families (TANF)	Fed awarding agency: DHHS, Administration for Children and Families	Federal award indirect cost rate: n/a	%
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Subrecipient	Subrecipient DUNS	Fed funds for this Supplement	Total All fed funds for this Activity	Subrecipient	Subrecipient DUNS	Fed funds for this Supplement	Total All fed funds for this Activity
Alamance	965194483	12,300	35,000	Jackson	019728518	12,300	35,000
Albemarle	130537822	12,300	35,000	Johnston	097599104	12,300	35,000
Alexander	030495105	12,300	35,000	Jones	095116935	12,300	35,000
Anson	847163029	12,300	35,000	Lee	067439703	12,300	35,000
Appalachian	780131541	12,300	35,000	Lenoir	042789748	12,300	35,000
Beaufort	091567776	12,300	35,000	Lincoln	086869336	12,300	35,000
Bladen	084171628	12,300	35,000	Macon	070626825	12,300	35,000
Brunswick	091571349	12,300	35,000	Madison	831052873	12,300	35,000
Buncombe	879203560	12,300	35,000	MTW	087204173	12,300	35,000
Burke	883321205	12,300	35,000	Mecklenburg	074498353	12,300	35,000
Cabarrus	143408289	12,300	35,000	Montgomery	025384603	12,300	35,000
Caldwell	948113402	12,300	35,000	Moore	050988146	12,300	35,000
Carteret	058735804	12,300	35,000	Nash	050425677	12,300	35,000
Caswell	077846053	12,300	35,000	New Hanover	040029563	12,300	35,000
Catawba	083677138	12,300	35,000	Northampton	097594477	12,300	35,000
Chatham	131356607	12,300	35,000	Onslow	172663270	12,300	35,000
Cherokee	130705072	12,300	35,000	Orange	139209659	12,300	35,000
Clay	145058231	12,300	35,000	Pamlico	097600456	12,300	35,000
Cleveland	879924850	12,300	35,000	Pender	100955413	12,300	35,000
Columbus	040040016	12,300	35,000	Person	091563718	12,300	35,000
Craven	091564294	12,300	35,000	Pitt	080889694	12,300	35,000
Cumberland	123914376	12,300	35,000	Randolph	027873132	12,300	35,000
Dare	082358631	12,300	35,000	Richmond	070621339	12,300	35,000
Davidson	077839744	12,300	35,000	Robeson	082367871	12,300	35,000
Davie	076526651	12,300	35,000	Rockingham	077847143	12,300	35,000
Duplin	095124798	12,300	35,000	Rowan	074494014	12,300	35,000
Durham	088564075	12,300	35,000	RPM	782359004	12,300	35,000
Edgecombe	093125375	12,300	35,000	Sampson	825573975	12,300	35,000
Forsyth	105316439	12,300	35,000	Scotland	091564146	12,300	35,000
Franklin	084168632	12,300	35,000	Stanly	131060829	12,300	35,000
Gaston	071062186	12,300	35,000	Stokes	085442705	12,300	35,000
Graham	020952383	12,300	35,000	Surry	077821858	12,300	35,000
Granville-Vance	063347626	12,300	35,000	Swain	146437553	12,300	35,000
Greene	091564591	12,300	35,000	Toe River	113345201	12,300	35,000
Guilford	071563613	12,300	35,000	Transylvania	030494215	12,300	35,000
Halifax	014305957	12,300	35,000	Union	079051637	12,300	35,000
Harnett	091565986	12,300	35,000	Wake	019625961	12,300	35,000
Haywood	070620232	12,300	35,000	Warren	030239953	12,300	35,000
Henderson	085021470	12,300	35,000	Wayne	040036170	12,300	35,000
Hertford	627320971	12,300	35,000	Wilkes	067439950	12,300	35,000
Hoke	091563643	12,300	35,000	Wilson	075585695	12,300	35,000
Hyde	832526243	12,300	35,000	Yadkin	089910624	12,300	35,000
Iredell	074504507	12,300	35,000				

Appendix C: Sample Budgetary Estimate

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DPH-Aid-To-Counties For Fiscal Year:15/16 Budgetary Estimate Number : 0

Activity 471	AA	126C 191A P3	126C 191B P3	126C 193A P6	126C 193B P6	1271 192A P3	1271 192B P3	1271 194A P6	1271 194B P6	Proposed Total	New Total
Service Period		06/01- 09/30	10/01- 05/31	06/01- 09/30	10/01- 05/31	06/01- 09/30	10/01- 05/31	06/01- 09/30	10/01- 05/31		
Payment Period		07/01- 10/31	11/01- 06/30	07/01- 10/31	11/01- 06/30	07/01- 10/31	11/01- 06/30	07/01- 10/31	11/01- 06/30		
01 Alamance		0	0	0	0	0	0	0	0	0	0
D1 Albemarle	* 0	35,200	35,200	82,133	82,133	82,134	82,134	35,200	35,200	469,334	469,334
02 Alexander		0	0	0	0	0	0	0	0	0	0
04 Anson		0	0	0	0	0	0	0	0	0	0
D2 Appalachian		0	0	0	0	0	0	0	0	0	0
07 Beaufort		0	0	0	0	0	0	0	0	0	0
09 Bladen		0	0	0	0	0	0	0	0	0	0
10 Brunswick		0	0	0	0	0	0	0	0	0	0
11 Buncombe		0	0	0	0	0	0	0	0	0	0
12 Burke		0	0	0	0	0	0	0	0	0	0
13 Cabarrus		0	0	0	0	0	0	0	0	0	0
14 Caldwell		0	0	0	0	0	0	0	0	0	0
16 Carteret		0	0	0	0	0	0	0	0	0	0
17 Caswell		0	0	0	0	0	0	0	0	0	0
18 Catawba		0	0	0	0	0	0	0	0	0	0
19 Chatham		0	0	0	0	0	0	0	0	0	0
20 Cherokee		0	0	0	0	0	0	0	0	0	0
22 Clay		0	0	0	0	0	0	0	0	0	0
23 Cleveland		0	0	0	0	0	0	0	0	0	0
24 Columbus		0	0	0	0	0	0	0	0	0	0
25 Craven		0	0	0	0	0	0	0	0	0	0
26 Cumberland		0	0	0	0	0	0	0	0	0	0
28 Dare		0	0	0	0	0	0	0	0	0	0
29 Davidson		0	0	0	0	0	0	0	0	0	0
30 Davie		0	0	0	0	0	0	0	0	0	0
31 Duplin		0	0	0	0	0	0	0	0	0	0
32 Durham		0	0	0	0	0	0	0	0	0	0
33 Edgecombe		0	0	0	0	0	0	0	0	0	0
34 Forsyth		0	0	0	0	0	0	0	0	0	0
35 Franklin		0	0	0	0	0	0	0	0	0	0
36 Gaston		0	0	0	0	0	0	0	0	0	0
38 Graham		0	0	0	0	0	0	0	0	0	0
D3 Gran-Vance		0	0	0	0	0	0	0	0	0	0
40 Greene		0	0	0	0	0	0	0	0	0	0
41 Guilford		0	0	0	0	0	0	0	0	0	0
42 Halifax		0	0	0	0	0	0	0	0	0	0
43 Harnett		0	0	0	0	0	0	0	0	0	0
44 Haywood		0	0	0	0	0	0	0	0	0	0
45 Henderson		0	0	0	0	0	0	0	0	0	0
46 Hertford		0	0	0	0	0	0	0	0	0	0
47 Hoke		0	0	0	0	0	0	0	0	0	0
48 Hyde		0	0	0	0	0	0	0	0	0	0
49 Iredell		0	0	0	0	0	0	0	0	0	0
50 Jackson		0	0	0	0	0	0	0	0	0	0

51 Johnston	* 0	35,200	35,200	82,133	82,133	82,134	82,134	35,200	35,200	469,334	469,334
52 Jones		0	0	0	0	0	0	0	0	0	0
53 Lee		0	0	0	0	0	0	0	0	0	0
54 Lenoir		0	0	0	0	0	0	0	0	0	0
55 Lincoln		0	0	0	0	0	0	0	0	0	0
56 Macon	* 0	35,200	35,200	82,134	82,134	82,134	82,134	35,200	35,200	469,336	469,336
57 Madison		0	0	0	0	0	0	0	0	0	0
D4 M-T-W		0	0	0	0	0	0	0	0	0	0
60 Mecklenburg		0	0	0	0	0	0	0	0	0	0
62 Montgomery		0	0	0	0	0	0	0	0	0	0
63 Moore		0	0	0	0	0	0	0	0	0	0
64 Nash		0	0	0	0	0	0	0	0	0	0
65 New Hanover		0	0	0	0	0	0	0	0	0	0
66 Northampton		0	0	0	0	0	0	0	0	0	0
67 Onslow		0	0	0	0	0	0	0	0	0	0
68 Orange		0	0	0	0	0	0	0	0	0	0
69 Pamlico		0	0	0	0	0	0	0	0	0	0
71 Pender		0	0	0	0	0	0	0	0	0	0
73 Person		0	0	0	0	0	0	0	0	0	0
74 Pitt	* 0	35,200	35,200	82,134	82,134	82,133	82,133	35,200	35,200	469,334	469,334
76 Randolph		0	0	0	0	0	0	0	0	0	0
77 Richmond		0	0	0	0	0	0	0	0	0	0
78 Robeson	* 0	35,200	35,200	82,134	82,134	82,133	82,133	35,200	35,200	469,334	469,334
79 Rockingham		0	0	0	0	0	0	0	0	0	0
80 Rowan		0	0	0	0	0	0	0	0	0	0
D5 R-P-M		0	0	0	0	0	0	0	0	0	0
82 Sampson		0	0	0	0	0	0	0	0	0	0
83 Scotland		0	0	0	0	0	0	0	0	0	0
84 Stanly		0	0	0	0	0	0	0	0	0	0
85 Stokes		0	0	0	0	0	0	0	0	0	0
86 Surry		0	0	0	0	0	0	0	0	0	0
87 Swain		0	0	0	0	0	0	0	0	0	0
D6 Toe Rriver		0	0	0	0	0	0	0	0	0	0
88 Transylvania		0	0	0	0	0	0	0	0	0	0
90 Union		0	0	0	0	0	0	0	0	0	0
92 Wake		0	0	0	0	0	0	0	0	0	0
93 Warren		0	0	0	0	0	0	0	0	0	0
96 Wayne		0	0	0	0	0	0	0	0	0	0
97 Wilkes		0	0	0	0	0	0	0	0	0	0
98 Wilson		0	0	0	0	0	0	0	0	0	0
99 Yadkin		0	0	0	0	0	0	0	0	0	0
Totals		176,000	176,000	410,668	410,668	410,668	410,668	176,000	176,000	2,346,672	2,346,672

DPH Program Administrator <i>C. G. Steen</i> 3-26-15	DPH Section Chief <i>Reksi L</i> 3/26/15
DPH Contracts Office <i>Whitney Miller</i> 3-26-15	DPH Budget Officer <i>Camela Cole</i> - 4/2/15

V. M. King 4/2/15

Appendix D: Sample Funding Authorization

Funding Authorization

Report Date: 6/12/2015

North Carolina
 Department of Health and Human Services
 Division of Public Health

MOORE
 14/15

Description	Activity	Fund	RCC	FRC	CFDA	CFDA Title	Federal Award Number	Federal Award Start Date	Federal Award End Date	Total
STD Prevention	610	1311	462B	NB	93.977	Preventive Health Services - Sexually Transmitted Diseases Control Grants	1H25PS004348-02	01/01/2015	12/31/2015	\$-167.00
Immunization Action Plan	715	1331	623C	VJ	93.268	Immunization Cooperative Agreements	H23IP000759-03	01/01/2015	12/31/2015	\$521.00
Total after revision:										\$354.00

Received and Agreed to by:
 Local Health Director


 Local Finance Officer
 Christine Dy Long

Appendix E: Aid-to-Counties Expenditure Control Schedule

Aid-to-Counties Expenditure Control Schedule for Calendar Year 2016

Payment Month	LHD Expenditure Reporting Period		Payment Date	DPH Staff Access	
	Begins	Last Day for Pymt in Month		Begins	Ends
January	Mon 1/11	Tue 1/19	Fri 1/22	Tue 1/26	Fri 2/5
February	Mon 2/8	Mon 2/15	Thu 2/18	Mon 2/22	Mon 3/7
March	Tue 3/8	Tue 3/15	Fri 3/18	Tue 3/22	Thu 4/7
April	Fri 4/8	Mon 4/18	Thu 4/21	Mon 4/25	Fri 5/6
May	Mon 5/9	Mon 5/16	Thu 5/19	Mon 5/23	Tue 6/7
June	Wed 6/8	Wed 6/15	Sat 6/18	Wed 6/22	Fri 7/8
July	Mon 7/11	Mon 7/18	Thu 7/21	Mon 7/25	Fri 8/5
August	Mon 8/8	Mon 8/15	Thu 8/18	Mon 8/22	Thu 9/8
September	Fri 9/9	Fri 9/16	Wed 9/21	Fri 9/23	Fri 10/7
October	Mon 10/10	Mon 10/17	Thu 10/20	Mon 10/24	Mon 11/7
November	Tue 11/8	Tue 11/15	Fri 11/18	Tue 11/22	Wed 12/7
December	Thu 12/8	Fri 12/16	Wed 12/21	Wed 12/28	Mon 1/9/17

Please note that LHD expenditure report due date is not a consistent date. This schedule takes into account weekends and holidays.

* NCAS Changes for DPH include, but are not limited to, budget revisions via 606s, reclassifications of expenditures, and budget amendments to LHD contracts. These changes will not be reflected in the monthly payments to the counties until they have been submitted to the Aid-to-Counties Database and "State Admin. Certified."

Appendix F: Glossary of Terms

Activity	Description of services assigned by the program in conjunction with an Activity number.
Activity Number	Tracking number assigned by the DPH Contracts Office that is referenced in the Aid-to-Counties database and the Agreement Addenda, and is used in conjunction with the description of services.
Agreement Addendum	An Agreement Addendum (AA) is an agreement between the Division and a single local health department which commissions work to be performed in a particular program area, known as an Activity. The Agreement Addendum defines the work activity to be performed, the timeframes, the deliverables, the performance measures, and reporting requirements.
Agreement Addendum Revision	An agreement that revises the Original Agreement Addendum. Revisions are numbered consecutively for each local health department.
Aid-to-Counties Database	The Aid-to-Counties (ATC) database is an Internet-based system which is accessed through the WIRM portal. (WIRM is the Web Identity Role Management portal.) The ATC database is used for financial authorization, reporting and reimbursement. Funding is authorized by DPH to each local health department for each authorized activity. The local health department uses the system to report expenditures.
Background	A section of the Agreement Addendum which provides understanding of problem or problems to be addressed and how it prevents goals from being achieved. This section describes the primary goal of the program and gives an overview of what the problem is, explaining why the service is necessary.
Benchmarks	Points of reference or a standard against which measurements can be compared. In the context of indicators and public health, a benchmark is an accurate data point, which is used as a reference for future comparisons (similar to a baseline). Sometimes it also refers to as “best practices” in a particular field.
Budgetary Estimate	The Budgetary Estimate (BE) is a paper document provided to the local health department, printed from the Aid-to-Counties database, which provides budget information by Activity Number and by funding source. The BE is attached to the Agreement Addendum when the AA is sent to the local health department for signature.
CFDA	The CFDA (Catalog of Federal Domestic Assistance) is a government-wide compendium of federal programs, projects, services, and activities that provide assistance or benefits to the American public. It contains financial and nonfinancial assistance programs administered by departments and establishments of the Federal government. Programs are assigned a unique CFDA number. Each CFDA number will have one or more grants associated with it. As of 2013, there are 474 separate CFDA numbers for federal DHHS programs.
Consolidated Agreement	An agreement between the State of North Carolina and a single local health department, district, or human services agency. There is one Consolidated Agreement (CA) executed for each of the 85 local health departments in North Carolina. The CA establishes the roles and responsibilities of each party, and the terms and conditions. A Consolidated Agreement is effective for a single state fiscal year, from July 1 to June 30.

Deliverable	A deliverable identifies the work product, activities, tasks, services, and/or output of the Agreement Addendum.
DUNS	The DUNS number (Data Universal Numbering System) is a unique nine-digit number, assigned by Dun & Bradstreet, that identifies an organization. It is a tool used by the federal government as an identifier for an organization when the government tracks how federal money is distributed. A contractor must have a DUNS number in order to register with SAM. DUNS number assignment is free for all businesses required to register with the federal government for contracts or grants. A contractor can obtain a DUNS number from Dun & Bradstreet at http://fedgov.dnb.com/webform .
Federal Award Number	Federal Award numbers are assigned to grants by the federal government.
Funding Authorization	<p>The Funding Authorization (FA) sets forth the amount of funds that can be made available to a local health department (LHD). It is used to detail, to each local health department, its program funding levels per State Fiscal Year. Amendments to program funding levels are also issued via FA.</p> <p>The FA displays the required federal funding information: the CFDA number, the Federal Award number, the name of the federal grant, and the awarding agency.</p>
Goals	Broad, long-term aims that define a desired result associated with identified strategic issues.
Indicator	A measurement that reflects the status of a system. Indicators reveal the direction of a system (a community, the economy, and the environment), whether it is going forward or backward, increasing or decreasing, improving or deteriorating, or staying the same.
Measure	A means of assessing; a basis or standard of comparison; an estimate of what is to be expected.
Negotiable Agreement Addendum	A negotiable Activity is one which requires further negotiation between the program and a local health department before it is executed. The Local Health Department is required to provide additional information on the AA, which is then reviewed by the Program. If the Program finds the additional information acceptable, the Program executes the AA.
Nonnegotiable Agreement Addendum	An Activity which has all terms, expectations and fees stated and requires no additional review before execution. It requires only the signature of the local health department's Health Director to execute. It is not signed by the Program.
Objectives	Objectives are defined as results of specific activities or outcomes to be achieved over a stated time. Objectives are specific, measurable, and realistic statements of intention. Objectives state who will experience what change or benefit and how much change is to be experienced in what time.
Outcome	An outcome is the benefit or change for individuals or intended beneficiaries due to participation in a program.
Payment Period	Timeframe in which the local health department can request reimbursement for payment of services. Dates are entered on the Agreement Addendum and in the Aid-to-Counties database. The Payment Period dates almost always begin on the first day of July and end on the last day of June.

Performance Monitoring/ Quality Assurance	Monitoring is regular observation and recording of activities taking place in a project or program. This monitoring can be by site visits, phone conference, viewing reports and other technical means.
Purpose	Identifies the goals of the Activity and desired outcome.
Reporting Requirements	A narrative which states what sorts of reporting are required. Descriptions of reporting should include references to frequency, due dates, who is the recipient of reports, format, and data source.
SAM	<p>SAM (System for Award Management) is a system which plans to combine federal procurement systems and the CFDA into one new system. This consolidation is being done in phases. The first phase of SAM includes the functionality from the following systems: Central Contractor Registry (CCR); Federal Agency Registration (Fedreg); Online Representations and Certifications Application; and Excluded Parties List System (EPLS).</p> <p>SAM collects, validates, stores and disseminates data in support of agency acquisition missions, including federal agency contract and assistance awards.</p>
Scope of Work	Narrative describing the who, what, when, how and where of service to be performed by the local health department.
Service	A service is a specific Activity that contributes to the overall goal of the program; e.g., an employment program with the overall goal of reducing unemployment might offer job training as a service.
Service Period	Timeframe in which the local health department can perform services. Dates will be entered on the Agreement Addendum and in the Aid-to-Counties database. The Service Period dates almost always begin on the first day of June and end on the last day of May.
SMART Measures	Performance measures that are <u>s</u> pecific, <u>m</u> easurable, <u>a</u> chievable, <u>r</u> elevant, and <u>t</u> ime-bound.
Supplement	<p>A Supplement is a single page which enables DPH to provide to the LHDs all the required information about the federal grant award.</p> <p>There is to be at least one Supplement page for <u>each</u> federal grant award <u>year</u> (as funds are by year) in line with the budget that the Program Staff has produced for distributing the federal grant funds. Those who have grants funding their AAs will have part of two award years making up the 12-month AA — so ultimately there will be (at least) two Supplement pages per AA. In addition, if the AA is funded with two (or more) different federal grants, the Program Staff will need to produce Supplement pages for each grant.</p> <p>A Supplement page is specific to a single state fiscal year and a single Activity, and each is numbered, starting with Supplement 1 (to be able to distinguish between them).</p>