

## **AMENDMENT #2**

This Agreement, made this 31st day of Oct., 2022 by and between **HEALTH RESEARCH INC.**, hereinafter referred to as "HRI," a domestic not-for-profit corporation, and **ALBANY COUNTY DEPARTMENT OF HEALTH**, hereinafter referred to as "Contractor."

**WHEREAS**, heretofore on or about the 2nd day of Oct 2020, the parties hereto entered into a certain agreement regarding "COVID-19 Enhanced Detection"; HRI Contract Number **6446-01**, which was subsequently modified by Amendment #1 dated 09/2/2021; and,

**WHEREAS** it is now desired to amend that provision of such contract designated as "Contract End Date" and to attach Exhibit "A" Revised and Exhibit "D" Addition.

**NOW THEREFORE**, it is mutually agreed by both parties the "Contract End Date" of Agreement HRI Contract Number 6446-01 will be **12/31/2023**.

It is further agreed, by and between the parties hereto, that said Agreement in all portions thereof, as heretofore and herein amended, shall remain in full force and effect in accordance with the terms thereof.

**IN WITNESS WHEREOF**, the parties hereto have agreed and executed this amendment.

**HEALTH RESEARCH INC.**

**ALBANY COUNTY DEPARTMENT OF  
HEALTH**

*Michael A. Saglimbeni*

\_\_\_\_\_  
Michael A. Saglimbeni  
Director, OSP & Subcontract Unit

\_\_\_\_\_  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_

**Exhibit A Revised – Deliverables**  
**Epidemiology & Laboratory Capacity (ELC) - COVID-19**  
**Capacity Building for Case Investigations and Contact Tracing Coordination**

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Revised Deliverables #2 - Approval to expand COVID-19 deliverables to assist with monkeypox and other infectious disease activities. COVID-19 activities must remain the primary purpose of this expansion and Monkeypox and other infectious diseases is in addition to the approved services provided and within scope. These activities must be conducted concurrently. See Expanded Reporting Requirements below.

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**Revised Deliverables #1 – Expanded, Effective 2/1/21**

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Funding is provided to Local Health Departments (LHD) for increased capacity to conduct case and contact investigations. The majority of this funding is expected to support new personnel to [enhance efforts for case investigations, contact tracing, expanded testing and surveillance, and vaccination activities across their communities, schools, childcare programs and other vulnerable populations \(e.g., congregate living settings, homeless shelters, etc.\)](#). Some funding may be allocated to travel, computers and other miscellaneous expenses in support of staff activities.

**Deliverables:**

- Increased staffing to conduct rapid and complete case investigations. Case investigation staff must be:
  - reflective of the demographics of the community
  - have experience in public health or clinical services
  - staffing ratios must be appropriate for current case counts and be flexible based on possible variations
  - staffing levels must be appropriate to investigate cases within 24 hours of reporting
- Increased staffing to coordinate contact tracing activities with State contact tracers to ensure contacts are reached within 48 hours of contact elicitation.
- Increase staffing where necessary to ensure contacts have access to testing within three days of initial notification, establish and maintain a current testing protocol within the county, provide transportation and coordination for contacts to be tested, and provide proper reporting in CDCMS of suspect cases/PUIs.
- Ensure daily monitoring of cases and contacts and any social support needs are being met for effective isolation/quarantine.
- Utilize the CDCMS (CommCare) to report all case and contact data.

**Expanded Deliverables - Effective 2/1/21:**

- [For reporting purposes, identify and track the number of cases from known contacts.](#)
- [Conduct public education/awareness campaigns, as needed, on contact tracing and other community mitigation strategies.](#)
- [Support enhanced testing as needed among schools, childcare programs and other vulnerable populations.](#)
- [Provide technical assistance to schools, childcare programs, and other community-based settings that focus on vulnerable populations to ensure the implementation of recommended mitigation strategies.](#)

- Support vaccination activities (e.g., vaccination PODs, vaccination education campaigns, etc.) that are not otherwise supported by other funding sources
- Coordinate with local officials within the county to identify sampling locations at wastewater treatment plants and/or other areas within the sewer collection system.
- Develop plans for wastewater sampling, testing, and reporting. Plan templates will be provided by the State.
- Develop a Wastewater Surveillance Response Plan. Plan templates will be provided by the State.
- Attend educational trainings (developed and provided by the State) on wastewater sampling, data analysis/interpretation, and public health responses.

**Reporting Requirements:**

CDCMS (CommCare) must be used to report all case and contact data. Data input into this system will be used to report to CDC on all case and contact investigation-related performance measures.

**Expanded Reporting Requirements:**

Testing performed by the county must be reported to the Electronic Clinical Laboratory Reporting System (ECLRS) within specified timeframes. Data reported through ECLRS will be used to report to CDC on all related testing-related performance measures.

Vaccines delivered by the county must be reported to the NYS Immunization Information System (NYSIIS) within specified timeframes. Data reported through NYSIIS will be used to report to CDC on all related vaccination-related performance measures.

Wastewater testing data must be reported to the NY wastewater surveillance system. Data reported to the State will be uploaded to the CDC's National Wastewater Surveillance System (NWSS).

Complete a Monkeypox Core Form found on the Communicable Disease Electronic Surveillance System (CDESS) by interviewing the patient or a proxy (e.g., family member, physician, etc.) who might be able to provide pertinent information. Be sure to record demographic information and follow-up that the address found in the medical chart or on the laboratory report is correct. If the patient does not reside in your jurisdiction, transfer the record in CDESS to the appropriate jurisdiction of residence (another NYS county, NYC, out-of-state). Contacts of monkeypox cases can also be entered and monitored in CDESS.

**NOTE:** The ELC COVID-19 funds are intended to increase public health staffing capacity and cannot supplant existing commitments. Should existing County-funded staff be moved to these funds, their existing position must be backfilled by the County. These funds should result in a net increase of total County public health staff.



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Disease Control and Prevention

Notice of Award

Award# 6 NU50CK000516-03-07  
FAIN# NU50CK000516  
Federal Award Date: 04/26/2022

EXHIBIT D ADDITION

**Recipient Information**

**1. Recipient Name**

Health Research, Inc.  
150 BROADWAY STE 560  
-DUP4  
MENANDS, NY 12204-2719  
[No Phone Record]

**2. Congressional District of Recipient**

20

**3. Payment System Identifier (ID)**

1141402155A1

**4. Employer Identification Number (EIN)**

141402155

**5. Data Universal Numbering System (DUNS)**

002436061

**6. Recipient's Unique Entity Identifier (UEI)**

G9H6SUM59YC4

**7. Project Director or Principal Investigator**

Dr. Emily Lutterluh  
emily.lutterluh@health.ny.gov  
518-474-1142

**8. Authorized Official**

Mr. Michael A. Saglimbeni  
Director of Sponsored Programs  
michael.saglimbeni@healthresearch.org  
518-431-1200

**Federal Agency Information**

CDC Office of Financial Resources

**9. Awarding Agency Contact Information**

Ms. Joelle Cadet  
Grants Management Specialist  
grx2@cdc.gov  
(404) 498-4349

**10. Program Official Contact Information**

Mr. Fred Maxineau  
PHA  
hyx2@cdc.gov  
404.639.0869

**Federal Award Information**

**11. Award Number**

6 NU50CK000516-03-07

**12. Unique Federal Award Identification Number (FAIN)**

NU50CK000516

**13. Statutory Authority**

301(A)AND317(K)(2)PHS42USC241(A)247B(K)2

**14. Federal Award Project Title**

Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases in New York State

**15. Assistance Listing Number**

93.323

**16. Assistance Listing Program Title**

Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)

**17. Award Action Type**

Administrative Action

**18. Is the Award R&D?**

No

**Summary Federal Award Financial Information**

**19. Budget Period Start Date** 08/01/2021 **- End Date** 07/31/2022

**20. Total Amount of Federal Funds Obligated by this Action** \$0.00

20a. Direct Cost Amount

\$0.00

20b. Indirect Cost Amount

\$0.00

**21. Authorized Carryover**

\$0.00

**22. Offset**

\$0.00

**23. Total Amount of Federal Funds Obligated this budget period** \$72,755,707.00

**24. Total Approved Cost Sharing or Matching, where applicable** \$0.00

**25. Total Federal and Non-Federal Approved this Budget Period** \$72,755,707.00

**26. Project Period Start Date** 08/01/2019 **- End Date** 07/31/2024

**27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period** Not Available

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Ms. Freda Johnson  
Grants Management Officer

**30. Remarks**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

Centers for Disease Control and Prevention

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Award# 6 NU50CK000516-03-07

FAIN# NU50CK000516

Federal Award Date: 04/26/2022

**Recipient Information****Recipient Name**

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150 BROADWAY STE 560  
-DUP4  
MENANDS, NY 12204-2719  
[No Phone Record]

**Congressional District of Recipient**

20

**Payment Account Number and Type**

1141402155A1

**Employer Identification Number (EIN) Data**

141402155

**Universal Numbering System (DUNS)**

002436061

**Recipient's Unique Entity Identifier (UEI)**

G9H6SUM59YC4

**31. Assistance Type**

Cooperative Agreement

**32. Type of Award**

Other

**33. Approved Budget**

(Excludes Direct Assistance)

**I. Financial Assistance from the Federal Awarding Agency Only****II. Total project costs including grant funds and all other financial participation**

<b>a. Salaries and Wages</b>	\$11,902,624.00
<b>b. Fringe Benefits</b>	\$4,721,933.00
<b>c. Total Personnel Costs</b>	\$16,624,557.00
<b>d. Equipment</b>	\$146,030.00
<b>e. Supplies</b>	\$12,989,404.00
<b>f. Travel</b>	\$217,255.00
<b>g. Construction</b>	\$0.00
<b>h. Other</b>	\$2,358,370.00
<b>i. Contractual</b>	\$35,796,943.00
<b>j. TOTAL DIRECT COSTS</b>	\$68,132,559.00
<b>k. INDIRECT COSTS</b>	\$4,623,148.00
<b>l. TOTAL APPROVED BUDGET</b>	\$72,755,707.00
<b>m. Federal Share</b>	\$72,755,707.00
<b>n. Non-Federal Share</b>	\$0.00

**34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-9390EWQ	19NU50CK000516C3	CK	41.51	93.323	\$0.00	75-2024-0943
0-9390F7F	19NU50CK000516C4	CK	41.51	93.323	\$0.00	75-X-0140
1-9390GCP	19NU50CK000516AMDC4	CK	41.51	93.323	\$0.00	75-X-0943
1-9390GCQ	19NU50CK000516THC4	CK	41.51	93.323	\$0.00	75-X-0943
1-9390GF0	19NU50CK000516PHLC4	CK	41.51	93.323	\$0.00	75-X-0943
1-9390GF6	19NU50CK000516PHL2C6	CK	41.51	93.323	\$0.00	75-X-0140
1-9390GKT	19NU50CK000516EDEXC5	CK	41.51	93.323	\$0.00	75-2122-0140
1-9390GY2	19NU50CK000516SCHLC6	CK	41.51	93.323	\$0.00	75-X-0140
1-9390H08	19NU50CK000516AMD2C6	CK	41.51	93.323	\$0.00	75-X-0943
0-9390EPX	19NU50CK000516CV	CK	41.51	93.323	\$0.00	75-2022-0943

**DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award**

Centers for Disease Control and Prevention

Award# 6 NU50CK000516-03-07

FAIN# NU50CK000516

Federal Award Date: 04/26/2022

**Direct Assistance**

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

## AWARD ATTACHMENTS

Health Research, Inc.

6 NU50CK000516-03-07

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1. Terms and Conditions

**ADDITIONAL TERMS AND CONDITIONS OF AWARD**

**Administrative Correction:** The purpose of the amendment is to extend the period of usage for all listed COVID document numbers to align with YR3 budget period which is August 1, 2021 to July 31, 2022. No action is required from the recipient.

YR1 and YR2 COVID Document Numbers
19NU50CK000516CV
19NU50CK000516C3
19NU50CK000516C4
19NU50CK000516AMDC4
19NU50CK000516THC4
19NU50CK000516PHLC4
19NU50CK000516PHL2C6
19NU50CK000516EDEXC5
19NU50CK000516SCHLC6
19NU50CK000516AMD2C6

All other terms and conditions of this award remains in effect throughout the budget period unless otherwise changed, in writing, by the Grants Management Officer.

PLEASE REFERENCE AWARD NUMBERS ON ALL CORRESPONDENCE



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Centers for Disease Control and Prevention

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Centers for Disease Control and Prevention

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FAIN# NU50CK000516

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