

**CONTRACT BETWEEN
INDIAN RIVER COUNTY BOARD OF COUNTY COMMISSIONERS
AND
STATE OF FLORIDA DEPARTMENT OF HEALTH
FOR OPERATION OF THE
INDIAN RIVER COUNTY HEALTH DEPARTMENT
CONTRACT YEAR 2024-2025**

This contract is made and entered into between the State of Florida, Department of Health (“State”), and the Indian River County Board of County Commissioners (“County”), through their undersigned authorities, effective October 1, 2024. State and County are jointly referred to as the “parties”.

RECITALS

A. Pursuant to Chapter 154, Florida Statutes, the intent of the legislature is to “promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated county health department services.”

B. County Health Departments were created throughout Florida to satisfy this legislative intent through the “promotion of the public’s health, the control and eradication of preventable diseases, and the provision of primary health care for special populations.”

C. Indian River County Health Department (“CHD”) is one of the created County Health Departments.

D. It is necessary for the parties hereto to enter into this contract to ensure coordination between the State and the County in the operation of the CHD.

NOW, THEREFORE, in consideration of the mutual promises set forth herein, the sufficiency of which is hereby acknowledged, the parties hereto agree as follows:

1. RECITALS. The parties mutually agree that the foregoing recitals are true and correct and incorporated herein by reference.
2. TERM. The parties mutually agree that this contract shall be effective from October 1, 2024, through September 30, 2025, or until a written contract replacing this contract is entered into between the parties, whichever is later, unless this contract is otherwise terminated according to the termination provisions outlined in paragraph 8. below.
3. SERVICES MAINTAINED BY THE CHD. The parties mutually agree that the CHD shall provide those services as outlined in Part III of Attachment II hereof, to maintain the following three levels of service pursuant to section 154.01(2), Florida Statutes, as defined below:
 - a. “Environmental health services” are those services that are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment that may contribute to the occurrence or transmission of disease. Environmental health services shall be supported by available federal, state, and local funds and shall include

those services mandated on a state or federal level. Examples of environmental health services include but are not limited to, food hygiene, safe drinking water supply, sewage, and solid waste disposal, swimming pools, group care facilities, migrant labor camps, toxic material control, radiological health, and occupational health.

b. "Communicable disease control services" are those services that protect the health of the general public through the detection, control, and eradication of diseases that are transmitted primarily by human beings. Communicable disease services shall be supported by available federal, state, and local funds and shall include those services mandated on a state or federal level. Such services include, but are not limited to, epidemiology, sexually transmissible disease detection and control, HIV/AIDS, immunization, tuberculosis control, and maintenance of vital statistics.

c. "Primary care services" are acute care and preventive services that are made available to well and sick persons who are unable to obtain such services due to lack of income or other barriers beyond their control. These services are provided to benefit individuals, improve the collective health of the public, and prevent and control the spread of disease. Primary health care services are provided at home, in group settings, or in clinics. These services shall be supported by available federal, state, and local funds and shall include services mandated on a state or federal level. Examples of primary health care services include but are not limited to first contact acute care services; chronic disease detection and treatment; maternal and child health services; family planning; nutrition; school health; supplemental food assistance for women, infants, and children; home health; and dental services.

4. FUNDING. The parties further agree that funding for the CHD will be handled as follows:

a. The funding to be provided by the parties and any other sources is outlined in Part II of Attachment II hereof. This funding will be used as shown in Part I of Attachment II.

i. The State's appropriated responsibility (*direct contribution excluding any state fees, Medicaid contributions, or any other funds not listed on the Schedule C*) as provided in Attachment II, Part II is an amount not to exceed \$4,052,069 (*State General Revenue, State Funds, Other State Funds and Federal Funds listed on the Schedule C*). The State's obligation to pay under this contract is contingent upon an annual appropriation by the Legislature.

ii. The County's appropriated responsibility (*direct contribution excluding any fees, other cash, or local contributions*) as provided in Attachment II, Part II is an amount not to exceed \$806,623 (*amount listed under the "Board of County Commissioners Annual Appropriations section of the revenue attachment*).

b. Overall expenditures will not exceed available funding or budget authority, whichever is less, (either the current year or from surplus trust funds) in any service category. Unless requested otherwise, any surplus at the end of the term of this contract in the County Health Department Trust Fund that is attributed to the CHD shall be carried forward to the next contract period.

c. Either party may establish service fees as allowed by law to fund activities of the CHD. Where applicable, such fees shall be automatically adjusted to at least the Medicaid fee schedule.

d. Either party may increase or decrease funding of this contract during the term hereof by notifying the other party in writing of the amount and purpose for the change in funding. If the State initiates the increase or decrease, the CHD will revise Attachment II and send a copy of the revised pages to the County and the State's Office of Budget and Revenue Management. If the County initiates the increase or decrease, the County shall notify the CHD in writing. The CHD will then revise Attachment II and send a copy of the revised pages to the State's Office of Budget and Revenue Management.

e. The name and address of the official payee to whom payments shall be made is:

County Health Department Trust Fund
Indian River County Health Department
Accounts Receivable, 1900 27th Street
Vero Beach, FL 32960-3383

5. CHD DIRECTOR or ADMINISTRATOR. Both parties agree the director or administrator of the CHD shall be a State employee or under contract with the State and will be under the day-to-day direction of the State's Deputy Secretary for County Health Systems. The director or administrator shall be selected by the State with the concurrence of the County. The director or administrator of the CHD shall ensure that non-categorical sources of funding are used to fulfill public health priorities in the community and the Long-Range Program Plan.

6. ADMINISTRATIVE POLICIES AND PROCEDURES. The parties hereto agree that the following standards should apply in the operation of the CHD:

a. The CHD and its personnel shall follow all State policies and procedures, except to the extent permitted for the use of County purchasing procedures as outlined in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel laws, rules, and procedures. Employees will report time in the Health Management System compatible format by program component as specified by the State.

b. The CHD shall comply with all applicable provisions of federal and state laws and regulations relating to its operation with the exception that the use of County purchasing procedures shall be allowed when it will result in a better price or service and no statewide purchasing contract has been implemented for those goods or services. In such cases, the CHD director or administrator must sign a justification, therefore, and all County purchasing procedures must be followed in their entirety, and such compliance shall be documented. Such justification and compliance documentation shall be maintained by the CHD following the terms of this contract. State procedures must be followed for all leases on facilities not enumerated in Attachment IV.

c. The CHD shall maintain books, records, and documents following the Generally Accepted Accounting Principles, as promulgated by the Governmental Accounting Standards Board, and the requirements of federal or state law. These records shall be maintained as

required by the State's Policies and Procedures for Records Management and shall be open for inspection at any time by the parties and the public, except for those records that are not otherwise subject to disclosure as provided by law which is subject to the confidentiality provisions of paragraphs 6.i. and 6.k., below. Books, records, and documents must be adequate to allow the CHD to comply with the following reporting requirements:

- i.* The revenue and expenditure requirements in the Florida Accounting Information Resource System; and
- ii.* The client registration and services reporting requirements of the minimum data set as specified in the most current version of the Client Information System/Health Management Component Pamphlet; and
- iii.* Financial procedures specified in the State's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda; and
- iv.* The CHD is responsible for assuring that all contracts with service providers include provisions that all subcontracted services be reported to the CHD in a manner consistent with the client registration and service reporting requirements of the minimum data set as specified in the Client Information System/Health Management Component Pamphlet.

d. All funds for the CHD shall be deposited in the County Health Department Trust Fund maintained by the state treasurer. These funds shall be accounted for separately from funds deposited for other CHDs and shall be used only for public health purposes in Indian River County.

e. That any surplus or deficit funds, including fees or accrued interest, remaining in the County Health Department Trust Fund account at the end of the contract year shall be credited or debited to the State or County, as appropriate, based on the funds contributed by each and the expenditures incurred by each. Expenditures will be charged to the program accounts by State and County based on the ratio of planned expenditures in this contract and funding from all sources is credited to the program accounts by State and County. The equity share of any surplus or deficit funds accruing to the State and County is determined each month and at the contract year-end. Surplus funds may be applied toward the funding requirements of each party in the following year. However, in each such case, all surplus funds, including fees and accrued interest, shall remain in the trust fund until accounted for in a manner that clearly illustrates the amount which has been credited to each party. The planned use of surplus funds shall be reflected in Attachment II, Part I of this contract, with special capital projects explained in Attachment V.

f. There shall be no transfer of funds between the three levels of services without a contract amendment unless the CHD director or administrator determines that an emergency exists wherein a time delay would endanger the public's health and the State's Deputy Secretary for County Health Systems have approved the transfer. The State's Deputy Secretary for County Health Systems shall forward written evidence of this approval to the CHD within 30 days after an emergency transfer.

g. The CHD may execute subcontracts for services necessary to enable the CHD to carry out the programs specified in this contract. Any such subcontract shall include all aforementioned audit and record-keeping requirements.

h. At the request of either party, an audit may be conducted by an independent certified public accountant on the financial records of the CHD, and the results made available to the parties within 180 days after the close of the CHD fiscal year. This audit will follow requirements contained in OMB Circular A-133, as revised, and may be in conjunction with audits performed by the County government. If audit exceptions are found, then the director or administrator of the CHD will prepare a corrective action plan and a copy of that plan and monthly status reports will be furnished to the contract managers for the parties.

i. The CHD shall not use or disclose any information concerning a recipient of services except as allowed by federal or state law or policy.

j. The CHD shall retain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this contract for five years after termination of this contract. If an audit has been initiated and audit findings have not been resolved at the end of five years, the records shall be retained until the resolution of the audit findings.

k. The CHD shall maintain the confidentiality of all data, files, and records that are confidential under the law or are otherwise exempted from disclosure as a public record under Florida law. The CHD shall implement procedures to ensure the protection and confidentiality of all such records and shall comply with sections 384.29, 381.004, 392.65, and 456.057, Florida Statutes, and all other state and federal laws regarding confidentiality. All confidentiality procedures implemented by the CHD shall be consistent with the State's Information Security Policies, Protocols, and Procedures. The CHD shall further adhere to any amendments to the State's security requirements and shall comply with any applicable professional standards of practice concerning client confidentiality.

l. The CHD shall abide by all State policies and procedures, which by this reference are incorporated herein as standards to be followed by the CHD.

m. The CHD shall establish a system through which applicants for services and current clients may present grievances over denial, modification, or termination of services. The CHD will advise applicants of the right to appeal a denial or exclusion from services, of failure to take account of a client's choice of service, and right to a fair hearing to the final governing authority of the CHD. Specific references to existing laws, rules, or program manuals are included in Attachment I of this contract.

n. The CHD shall comply with the provisions contained in the Civil Rights Compliance and Non-Discrimination Certificate, hereby incorporated into this contract as Attachment III.

o. The CHD shall submit quarterly reports to the County that shall include at least the following:

- i.* The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report; and
- ii.* A written explanation to the County of service variances reflected in the year-end DE385L1 report if the variance exceeds or falls below 25 percent of the planned expenditure amount for the contract year. However, if the amount of the service-specific variance between actual and planned expenditures does not exceed three percent of the total planned expenditures for the level of service in which the type of service is included, a variance explanation is not required. A copy of the written explanation shall be sent to the State's Office of Budget and Revenue Management.

p. The dates for the submission of quarterly reports to the County shall be as follows unless the generation and distribution of reports are delayed due to circumstances beyond the CHD's control:

- i.* March 1, 2025, for the reporting period of October 1, 2024, through December 31, 2024; and
- ii.* June 1, 2025, for the reporting period of October 1, 2024, through March 31, 2025; and
- iii.* September 1, 2025, for the reporting period of October 1, 2024 through June 30, 2025; and
- iv.* December 1, 2025, for the reporting period of October 1, 2024 through September 30, 2025.

7. FACILITIES AND EQUIPMENT. The parties mutually agree that:

a. CHD facilities shall be provided as specified in Attachment IV to this contract and the County shall own the facilities used by the CHD unless otherwise provided in Attachment IV.

b. The County shall ensure adequate fire and casualty insurance coverage for County-owned CHD offices and buildings and all furnishings and equipment in CHD offices through either a self-insurance program or insurance purchased by the County.

c. All vehicles will be transferred to the ownership of the County and registered as County vehicles. The County shall ensure insurance coverage for these vehicles is available through either a self-insurance program or insurance purchased by the County. All vehicles will be used solely for CHD operations. Vehicles purchased through the County Health Department Trust Fund shall be sold at fair market value when they are no longer needed by the CHD and the proceeds returned to the County Health Department Trust Fund.

8. TERMINATION.

a. Termination at Will. This contract may be terminated by either party without cause upon no less than 180 calendar days' notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties.

b. Termination Because of Lack of Funds. In the event funds to finance this contract become unavailable, either party may terminate this contract upon no less than 24 hours' notice.

c. Termination for Breach. This contract may be terminated by either party for a material breach of an obligation hereunder, upon no less than 30 days' notice. Waiver of a breach of any provisions of this contract shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the terms of this contract.

9. MISCELLANEOUS. The parties further agree:

a. Availability of Funds. If this contract, any renewal hereof, or any term, performance, or payment hereunder, extends beyond the CHD fiscal year beginning July 1, 2024, it is agreed that the performance and payment under this contract are contingent upon an annual appropriation by the Legislature, under section 287.0582, Florida Statutes.

b. Contract Managers. The name and addresses of the contract managers for the parties under this contract are as follows:

For the State:

Mayur Rao
Name
Administrative Services Director II
Title
1900 27th Street

Vero Beach, Fl., 32960-3383
Address

Mayur.rao@fl.health.gov
Email Address
772-794-7464
Telephone

For the County:

Kristin Daniels
Name
Budget Director
Title
1801 27th Street

Vero Beach, Fl., 32960-3383
Address

kdaniels@ircgov.com
Email Address
772-567-8000 Ext. 1214
Telephone

If different contract managers are designated after the execution of this contract, the name, address, email address, and telephone number of the new representative shall be furnished in writing to the other parties and attached to the originals of this contract.

c. Captions. The captions and headings contained in this contract are for the convenience of the parties only and do not in any way modify, amplify, or give additional notice of the provisions hereof.

d. Notices. Any notices provided under this contract must be delivered by certified mail, return receipt requested, in person with proof of delivery, or by email to the email address of the respective party identified in Section 9.b., above.

In WITNESS THEREOF, the parties hereto have caused this eight page contract, with its attachments as referenced, including Attachment I (two pages), Attachment II (six pages), Attachment III (one page), Attachment IV (one page), and Attachment V (one page), to be executed by their undersigned officials as duly authorized effective the 1st day of October 2024.

**BOARD OF COUNTY COMMISSIONERS
FOR INDIAN RIVER COUNTY**

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

SIGNED BY: _____

NAME: _____

TITLE: _____

DATE: _____

SIGNED BY: _____

NAME: Joseph A. Ladapo, M.D., Ph.D.

TITLE: State Surgeon General

DATE: _____

ATTESTED TO:

SIGNED BY: _____

NAME: _____

TITLE: _____

DATE: _____

SIGNED BY:  _____

NAME: Miranda C Swanson, MPH

TITLE: CHD Director or Administrator

DATE: _____

ATTACHMENT I
INDIAN RIVER COUNTY HEALTH DEPARTMENT
PROGRAM SPECIFIC REPORTING REQUIREMENTS AND PROGRAMS REQUIRING
COMPLIANCE WITH THE PROVISIONS OF SPECIFIC MANUALS

Some health services must comply with specific program and reporting requirements in addition to the Personal Health Coding Pamphlet (DHP 50-20), Environmental Health Coding Pamphlet (DHP 50-21) and FLAIR requirements because of federal or state law, regulation or rule. If a county health department is funded to provide one of these services, it must comply with the special reporting requirements for that service. The services and the reporting requirements are listed below:

<u>Service</u>	<u>Requirement</u>
1. Sexually Transmitted Disease Program	Requirements as specified in F.A.C. 64D-3, F.S. 381 and F.S. 384.
2. Dental Health	Periodic financial and programmatic reports as specified by the program office.
3. Special Supplemental Nutrition Program for Women, Infants and Children (including the WIC Breastfeeding Peer Counseling Program)	Service documentation and monthly financial reports as specified in DHM 150-24* and all federal, state and county requirements detailed in program manuals and published procedures.
4. Healthy Start/ Improved Pregnancy Outcome	Requirements as specified in the 2007 Healthy Start Standards and Guidelines and as specified by the Healthy Start Coalitions in contract with each county health department.
5. Family Planning	Requirements as specified in Public Law 91-572, 42 U.S.C. 300, et seq., 42 CFR part 59, subpart A, 45 CFR parts 74 & 92, 2 CFR 215 (OMB Circular A-110) OMB Circular A-102, F.S. 381.0051, F.A.C. 64F-7, F.A.C. 64F-16, and F.A.C. 64F-19. Requirements and Guidance as specified in the Program Requirements for Title X Funded Family Planning Projects (Title X Requirements)(2014) and the Providing Quality Family Planning Services (QFP): Recommendations of CDC and the U.S. Office of Population Affairs published on the Office of Population Affairs website. Programmatic annual reports as specified by the program office as specified in the annual programmatic Scope of Work for Family Planning and Maternal Child Health Services, including the Family Planning Annual Report (FPAR), and other minimum guidelines as specified by the Policy Web Technical Assistance Guidelines.
6. Immunization	Periodic reports as specified by the department pertaining to immunization levels in kindergarten and/or seventh grade pursuant to instructions contained in the Immunization Guidelines-Florida Schools, Childcare Facilities and Family Daycare Homes (DH Form 150-615) and Rule 64D-3.046, F.A.C. In addition, periodic reports as specified by the department pertaining to the surveillance/investigation of reportable vaccine-preventable diseases, adverse events, vaccine accountability, and assessment of immunization

- levels as documented in Florida SHOTS and supported by CHD Guidebook policies and technical assistance guidance.
7. Environmental Health
Requirements as specified in Environmental Health Programs Manual 150-4* and DHP 50-21*
 8. HIV/AIDS Program
Requirements as specified in F.S. 384.25 and F.A.C. 64D-3.030 and 64D-3.031. Case reporting should be on Adult HIV/AIDS Confidential Case Report CDC Form DH2139 and Pediatric HIV/AIDS Confidential Case Report CDC Form DH2140.

Requirements as specified in F.A.C. 64D-2 and 64D-3, F.S. 381 and F.S. 384. Socio-demographic and risk data on persons tested for HIV in CHD clinics should be reported on Lab Request DH Form 1628 in accordance with the Forms Instruction Guide. Requirements for the HIV/AIDS Patient Care programs are found in the Patient Care Contract Administrative Guidelines.
 9. School Health Services
Requirements as specified in the Florida School Health Administrative Guidelines (May 2012). Requirements as specified in F.S. 381.0056, F.S. 381.0057, F.S. 402.3026 and F.A.C. 64F-6.
 10. Tuberculosis
Tuberculosis Program Requirements as specified in F.A.C. 64D-3 and F.S. 392.
 11. General Communicable Disease Control
Carry out surveillance for reportable communicable and other acute diseases, detect outbreaks, respond to individual cases of reportable diseases, investigate outbreaks, and carry out communication and quality assurance functions, as specified in F.A.C. 64D-3, F.S. 381, F.S. 384 and the CHD Epidemiology Guide to Surveillance and Investigations.
 12. Refugee Health Program
Programmatic and financial requirements as specified by the program office.

*or the subsequent replacement if adopted during the contract period.

ATTACHMENT II

INDIAN RIVER COUNTY HEALTH DEPARTMENT

PART I. PLANNED USE OF COUNTY HEALTH DEPARTMENT TRUST FUND BALANCES

	Estimated State Share of CHD Trust Fund Balance	Estimated County Share of CHD Trust Fund Balance	Total
1. CHD Trust Fund Ending Balance 09/30/24	137724	1028368	1166092
2. Drawdown for Contract Year October 1, 2024 to September 30, 2025	-137724	-400061	-537785
3. Special Capital Project use for Contract Year October 1, 2024 to September 30, 2025	0	0	0
4. Balance Reserved for Contingency Fund October 1, 2024 to September 30, 2025	0	628307	628307

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects, and mobile health vans.

ATTACHMENT II

INDIAN RIVER COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

October 1, 2024 to September 30, 2025

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
1. GENERAL REVENUE - STATE					
015040 AIDS PATIENT CARE	100,000	0	100,000	0	100,000
015040 CHD - TB COMMUNITY PROGRAM	41,050	0	41,050	0	41,050
015040 FAMILY PLANNING GENERAL REVENUE	22,679	0	22,679	0	22,679
015040 PRIMARY CARE PROGRAM	187,853	0	187,853	0	187,853
015040 RACIAL & ETHNIC DISPARITIES - CHD EXPENSES	52,000	0	52,000	0	52,000
015040 SCHOOL HEALTH SERVICES	136,867	0	136,867	0	136,867
015040 SWIMMING LESSONS VOUCHER PROGRAM	6,600	0	6,600	0	6,600
015050 CHD GENERAL REVENUE NON-CATEGORICAL	1,827,279	0	1,827,279	0	1,827,279
GENERAL REVENUE TOTAL	2,374,328	0	2,374,328	0	2,374,328
2. NON GENERAL REVENUE - STATE					
015010 ENVIRONMENTAL BIOMEDICAL WASTE PROGRAM	7,154	0	7,154	0	7,154
015010 TOBACCO STATE & COMMUNITY HEALTHY BABY	10,000	0	10,000	0	10,000
NON GENERAL REVENUE TOTAL	17,154	0	17,154	0	17,154
3. FEDERAL FUNDS - STATE					
007000 AIDS DRUG ASSISTANCE PROGRAM ADMIN HQ	39,388	0	39,388	0	39,388
007000 WIC BREASTFEEDING PEER COUNSELING PROG	58,125	0	58,125	0	58,125
007000 COASTAL BEACH WATER QUALITY MONITORING	12,454	0	12,454	0	12,454
007000 COMPREHENSIVE COMMUNITY CARDIO - PHBG	35,000	0	35,000	0	35,000
007000 ELC COVID ENHANCED DETECTION EXPANSION GRANT	112,540	0	112,540	0	112,540
007000 FAMILY PLANNING TITLE X - GRANT	34,828	0	34,828	0	34,828
007000 PUBLIC HLTH INFRASTRUCTURE & WORKFORCE/CENTRAL 1	152,988	0	152,988	0	152,988
007000 IMMUNIZATION ACTION PLAN	51,376	0	51,376	0	51,376
007000 MCH SPEC PRJ SOCIAL DETERMINANTS HLTH COMM EDU	32,206	0	32,206	0	32,206
007000 BASE COMMUNITY PREPAREDNESS CAPABILITY	91,613	0	91,613	0	91,613
007000 BASE PUB HLTH SURVEILLANCE & EPI INVESTIGATION	83,823	0	83,823	0	83,823
007000 AIDS PREVENTION	56,262	0	56,262	0	56,262
007000 RYAN WHITE TITLE II GRANT/CHD CONSORTIUM	80,000	0	80,000	0	80,000
007000 WIC PROGRAM ADMINISTRATION	669,916	0	669,916	0	669,916
015075 SCHOOL HEALTH SERVICES	150,068	0	150,068	0	150,068
FEDERAL FUNDS TOTAL	1,660,587	0	1,660,587	0	1,660,587
4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE					
001020 CHD STATEWIDE ENVIRONMENTAL FEES	160,176	0	160,176	0	160,176
001092 ON SITE SEWAGE DISPOSAL PERMIT FEES	280,087	0	280,087	0	280,087
001092 CHD STATEWIDE ENVIRONMENTAL FEES	2,418	0	2,418	0	2,418
001206 ON SITE SEWAGE DISPOSAL PERMIT FEES	25,130	0	25,130	0	25,130
001206 SANITATION CERTIFICATES (FOOD INSPECTION)	2,614	0	2,614	0	2,614
001206 SEPTIC TANK RESEARCH SURCHARGE	6,153	0	6,153	0	6,153
001206 SEPTIC TANK VARIANCE FEES 50%	867	0	867	0	867
001206 PUBLIC SWIMMING POOL PERMIT FEES-10% HQ TRANSFER	755	0	755	0	755
001206 DRINKING WATER PROGRAM OPERATIONS	456	0	456	0	456
001206 REGULATION OF BODY PIERCING SALONS	20	0	20	0	20

ATTACHMENT II

INDIAN RIVER COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

October 1, 2024 to September 30, 2025

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
001206 TANNING FACILITIES	300	0	300	0	300
001206 TATTO PROGRAM ENVIRONMENTAL HEALTH	1,565	0	1,565	0	1,565
001206 MOBILE HOME & RV PARK FEES	2,413	0	2,413	0	2,413
FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL	482,954	0	482,954	0	482,954
5. OTHER CASH CONTRIBUTIONS - STATE:					
031005 GENERAL CLINIC RABIES SERVICES & DRUG PURCHASES	11,000	0	11,000	0	11,000
031005 CHD GENERAL REVENUE NON-CATEGORICAL	0	0	0	0	0
090001 DRAW DOWN FROM PUBLIC HEALTH UNIT	137,724	0	137,724	0	137,724
OTHER CASH CONTRIBUTION TOTAL	148,724	0	148,724	0	148,724
6. MEDICAID - STATE/COUNTY:					
001057 CHD CLINIC FEES	0	5,284	5,284	0	5,284
001148 CHD CLINIC FEES	0	21,763	21,763	0	21,763
MEDICAID TOTAL	0	27,047	27,047	0	27,047
7. ALLOCABLE REVENUE - STATE:					
001004 CHD STATEWIDE ENVIRONMENTAL FEES	9,564	0	9,564	0	9,564
ALLOCABLE REVENUE TOTAL	9,564	0	9,564	0	9,564
8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE					
ADAP	0	0	0	200,806	200,806
PHARMACY DRUG PROGRAM	0	0	0	1,298	1,298
WIC PROGRAM	0	0	0	2,555,183	2,555,183
BUREAU OF PUBLIC HEALTH LABORATORIES	0	0	0	18,135	18,135
IMMUNIZATIONS	0	0	0	45,753	45,753
OTHER STATE CONTRIBUTIONS TOTAL	0	0	0	2,821,175	2,821,175
9. DIRECT LOCAL CONTRIBUTIONS - BCC/TAX DISTRICT					
008040 CHD LOCAL REVENUE & EXPENDITURES	0	806,623	806,623	0	806,623
DIRECT COUNTY CONTRIBUTIONS TOTAL	0	806,623	806,623	0	806,623
10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY					
001077 CHD CLINIC FEES	0	318	318	0	318
001094 CHD LOCAL ENVIRONMENTAL FEES	0	277,347	277,347	0	277,347
001110 VITAL STATISTICS CERTIFIED RECORDS	0	280,000	280,000	0	280,000
FEES AUTHORIZED BY COUNTY TOTAL	0	557,665	557,665	0	557,665
11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY					
001029 CHD CLINIC FEES	0	3,693	3,693	0	3,693
001090 CHD CLINIC FEES	0	2,576	2,576	0	2,576
010300 MIGRANT LABOR HOUSING INSPECTION H-2A PROGRAM	0	1,000	1,000	0	1,000
011000 BLUE FOUNDATION COUNTY GRANTS	0	70,000	70,000	0	70,000
011000 REVENUE CONTRACT/MOA W/NO REPORTING REQUIREMENT	0	22,380	22,380	0	22,380
011000 HEALTHY START NURSE FAM PARTNERSHIP EXPAND CHD	0	99,512	99,512	0	99,512
011001 CHD HEALTHY START COALITION CONTRACT	0	2,141	2,141	0	2,141

ATTACHMENT II

INDIAN RIVER COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

October 1, 2024 to September 30, 2025

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
090002 DRAW DOWN FROM PUBLIC HEALTH UNIT	0	400,061	400,061	0	400,061
OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL	0	601,363	601,363	0	601,363
12. ALLOCABLE REVENUE - COUNTY					
001004 CHD STATEWIDE ENVIRONMENTAL FEES	0	9,564	9,564	0	9,564
COUNTY ALLOCABLE REVENUE TOTAL	0	9,564	9,564	0	9,564
13. BUILDINGS - COUNTY					
ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	565,363	565,363
OTHER (Specify)	0	0	0	0	0
UTILITIES	0	0	0	227,968	227,968
BUILDING MAINTENANCE	0	0	0	127,663	127,663
WABASSO SITE - ANNUAL RENATL EQUIVALENT VALUE	0	0	0	86,118	86,118
WABASSO SITE - UTILITIES	0	0	0	34,725	34,725
WABASSO SITE - BUILDING MAINTENANCE	0	0	0	19,446	19,446
OTHER (Specify)	0	0	0	0	0
BUILDINGS TOTAL	0	0	0	1,061,283	1,061,283
14. OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST FUND - COUNTY					
EQUIPMENT / VEHICLE PURCHASES	0	0	0	0	0
VEHICLE INSURANCE	0	0	0	0	0
VEHICLE MAINTENANCE	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTIONS TOTAL	0	0	0	0	0
GRAND TOTAL CHD PROGRAM	4,693,311	2,002,262	6,695,573	3,882,458	10,578,031

ATTACHMENT II

INDIAN RIVER COUNTY HEALTH DEPARTMENT

Part III, Planned Staffing, Clients, Services and Expenditures By Program Service Area Within Each Level of Service
October 1, 2024 to September 30, 2025

	FTE's (0.00)	Clients Units	Services/ Visits	Quarterly Expenditure Plan				State	County	Grand Total
				1st	2nd (Whole dollars only)	3rd	4th			
A. COMMUNICABLE DISEASE CONTROL:										
IMMUNIZATION (101)	2.35	205	252	67,476	57,840	67,476	58,795	117,749	133,838	251,587
SEXUALLY TRANS. DIS. (102)	2.93	199	240	83,054	71,193	83,054	72,370	199,061	110,610	309,671
HIV/AIDS PREVENTION (03A1)	2.86	0	898	73,527	63,027	73,527	64,070	274,151	0	274,151
HIV/AIDS SURVEILLANCE (03A2)	0.06	0	30	1,322	1,133	1,322	1,151	4,928	0	4,928
HIV/AIDS PATIENT CARE (03A3)	3.24	130	245	104,875	89,898	104,875	91,383	372,593	18,438	391,031
ADAP (03A4)	0.71	142	3,905	17,254	14,790	17,254	15,035	64,333	0	64,333
TUBERCULOSIS (104)	1.36	21	131	43,378	37,183	43,378	37,797	159,549	2,187	161,736
COMM. DIS. SURV. (106)	8.05	0	19	194,677	166,876	194,677	169,635	725,865	0	725,865
HEPATITIS (109)	0.00	0	0	0	0	0	0	0	0	0
PREPAREDNESS AND RESPONSE (116)	1.17	0	1	35,222	30,192	35,222	30,691	131,327	0	131,327
REFUGEE HEALTH (118)	0.00	0	0	0	0	0	0	0	0	0
VITAL RECORDS (180)	3.00	10,857	39,404	60,252	51,647	60,252	52,501	0	224,652	224,652
COMMUNICABLE DISEASE SUBTOTAL	25.73	11,554	45,125	681,037	583,779	681,037	593,428	2,049,556	489,725	2,539,281
B. PRIMARY CARE:										
CHRONIC DISEASE PREVENTION PRO (210)	1.23	0	74	25,247	21,641	25,247	21,999	94,134	0	94,134
WIC (21W1)	10.01	2,478	30,869	205,120	175,828	205,120	178,733	764,801	0	764,801
TOBACCO USE INTERVENTION (212)	0.14	0	0	3,410	2,923	3,410	2,972	12,715	0	12,715
WIC BREASTFEEDING PEER COUNSELING (21W2)	1.56	0	2,496	23,557	20,193	23,557	20,526	87,833	0	87,833
FAMILY PLANNING (223)	3.78	115	205	106,962	91,688	106,962	93,204	236,269	162,547	398,816
IMPROVED PREGNANCY OUTCOME (225)	0.00	0	0	0	0	0	0	0	0	0
HEALTHY START PRENATAL (227)	0.63	1,158	5,013	17,743	15,209	17,743	15,460	0	66,155	66,155
COMPREHENSIVE CHILD HEALTH (229)	0.00	0	0	0	0	0	0	0	0	0
HEALTHY START CHILD (231)	0.59	1,027	4,729	15,740	13,492	15,740	13,715	0	58,687	58,687
SCHOOL HEALTH (234)	3.41	0	86,330	89,869	77,036	89,869	78,309	335,083	0	335,083
COMPREHENSIVE ADULT HEALTH (237)	0.00	0	0	0	0	0	0	0	0	0
COMMUNITY HEALTH DEVELOPMENT (238)	7.28	0	2,411	190,507	163,302	190,507	166,000	458,981	251,335	710,316
DENTAL HEALTH (240)	0.00	0	0	0	0	0	0	0	0	0
PRIMARY CARE SUBTOTAL	28.63	4,778	132,127	678,155	581,312	678,155	590,918	1,989,816	538,724	2,528,540
C. ENVIRONMENTAL HEALTH:										
Water and Onsite Sewage Programs										
COSTAL BEACH MONITORING (347)	0.14	123	123	5,715	4,899	5,715	4,981	21,059	251	21,310
LIMITED USE PUBLIC WATER SYSTEMS (357)	0.54	37	377	13,627	11,681	13,627	11,873	4,742	46,066	50,808
PUBLIC WATER SYSTEM (358)	0.05	0	2	1,184	1,015	1,184	1,030	29	4,384	4,413
PRIVATE WATER SYSTEM (359)	1.25	319	2,008	34,313	29,413	34,313	29,900	664	127,275	127,939
ONSITE SEWAGE TREATMENT & DISPOSAL (361)	7.88	2,936	11,743	173,500	148,724	173,500	151,182	284,265	362,641	646,906
Group Total	9.86	3,415	14,253	228,339	195,732	228,339	198,966	310,759	540,617	851,376
Facility Programs										
TATTOO FACILITY SERVICES (344)	0.21	179	148	5,243	4,495	5,243	4,569	19,170	380	19,550
FOOD HYGIENE (348)	1.26	108	464	28,936	24,803	28,936	25,213	24,663	83,225	107,888

ATTACHMENT II

INDIAN RIVER COUNTY HEALTH DEPARTMENT

**Part III, Planned Staffing, Clients, Services and Expenditures By Program Service Area Within Each Level of Service
October 1, 2024 to September 30, 2025**

	FTE's (0.00)	Clients Units	Services/ Visits	Quarterly Expenditure Plan				State	County	Grand Total
				1st	2nd (Whole dollars only)	3rd	4th			
BODY PIERCING FACILITIES SERVICES (349)	0.01	1	0	419	360	419	366	1,536	28	1,564
GROUP CARE FACILITY (351)	0.58	102	132	13,596	11,655	13,596	11,848	306	50,389	50,695
MIGRANT LABOR CAMP (352)	0.17	26	101	4,612	3,954	4,612	4,019	2,091	15,106	17,197
HOUSING & PUB. BLDG. (353)	0.13	1	29	3,848	3,298	3,848	3,353	66	14,281	14,347
MOBILE HOME AND PARK (354)	0.26	58	132	7,347	6,298	7,347	6,401	16,516	10,877	27,393
POOLS/BATHING PLACES (360)	1.63	497	1,778	37,762	32,369	37,762	32,905	61,182	79,616	140,798
BIOMEDICAL WASTE SERVICES (364)	1.87	659	842	41,538	35,606	41,538	36,196	151,444	3,434	154,878
TANNING FACILITY SERVICES (369)	0.04	9	15	1,063	911	1,063	927	3,820	144	3,964
Group Total	6.16	1,640	3,641	144,364	123,749	144,364	125,797	280,794	257,480	538,274
Groundwater Contamination										
STORAGE TANK COMPLIANCE SERVICES (355)	0.00	0	0	0	0	0	0	0	0	0
SUPER ACT SERVICES (356)	0.00	0	0	0	0	0	0	0	0	0
Group Total	0.00	0	0	0	0	0	0	0	0	0
Community Hygiene										
COMMUNITY ENVIR. HEALTH (345)	0.10	0	320	2,896	2,482	2,896	2,523	55	10,742	10,797
INJURY PREVENTION (346)	0.16	0	0	5,715	4,899	5,715	4,981	21,027	283	21,310
LEAD MONITORING SERVICES (350)	0.12	0	0	1,786	1,531	1,786	1,557	59	6,601	6,660
PUBLIC SEWAGE (362)	0.87	7	77	19,213	16,469	19,213	16,742	463	71,174	71,637
SOLID WASTE DISPOSAL SERVICE (363)	0.00	0	0	27	23	27	22	0	99	99
SANITARY NUISANCE (365)	0.19	26	8	5,284	4,530	5,284	4,605	97	19,606	19,703
RABIES SURVEILLANCE (366)	0.16	56	142	4,666	3,999	4,666	4,065	83	17,313	17,396
ARBORVIRUS SURVEIL. (367)	0.00	0	0	0	0	0	0	0	0	0
RODENT/ARTHROPOD CONTROL (368)	0.00	0	0	0	0	0	0	0	0	0
WATER POLLUTION (370)	0.28	0	54	8,766	7,514	8,766	7,638	152	32,532	32,684
INDOOR AIR (371)	0.00	0	0	232	199	232	202	1	864	865
RADIOLOGICAL HEALTH (372)	0.00	0	0	22	19	22	19	0	82	82
TOXIC SUBSTANCES (373)	0.15	7	24	4,424	3,792	4,424	3,856	76	16,420	16,496
Group Total	2.03	96	625	53,031	45,457	53,031	46,210	22,013	175,716	197,729
ENVIRONMENTAL HEALTH SUBTOTAL	18.05	5,151	18,519	425,734	364,938	425,734	370,973	613,566	973,813	1,587,379
D. NON-OPERATIONAL COSTS:										
NON-OPERATIONAL COSTS (599)	0.00	0	0	0	0	0	0	0	0	0
ENVIRONMENTAL HEALTH SURCHARGE (399)	0.00	0	0	10,801	9,259	10,801	9,412	40,273	0	40,273
MEDICAID BUYBACK (611)	0.00	0	0	27	23	27	23	100	0	100
NON-OPERATIONAL COSTS SUBTOTAL	0.00	0	0	10,828	9,282	10,828	9,435	40,373	0	40,373
TOTAL CONTRACT	72.41	21,483	195,771	1,795,754	1,539,311	1,795,754	1,564,754	4,693,311	2,002,262	6,695,573

ATTACHMENT III

INDIAN RIVER COUNTY HEALTH DEPARTMENT

CIVIL RIGHTS COMPLIANCE AND NON-DISCRIMINATION CERTIFICATE

1. The CHD agrees to complete the Civil Rights Compliance Questionnaire, DH Forms 946 A and B (or the subsequent replacement if adopted during the contract period), if so requested by the Department.
2. The CHD assures that it will comply with the Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.
3. Assurance of Civil Rights Compliance: The CHD hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.); Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.); Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794); the Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.); Title II and Title III of the Americans with Disabilities Act (ADA) of 1990, as amended by the ADA Amendment Act of 2008 (42 U.S.C. 12131-12189) and as implemented by Department of Justice regulations at 28 CFR Parts 35 and 36; Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency" (August 11, 2000); all provisions required by the implementing regulations of the U.S. Department of Agriculture (7 CFR Part 15 et seq.); and FNS directives and guidelines to the effect that no person shall, on the ground of race, color, national origin, age, sex, or disability, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity for which the agency receives Federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.

By providing this assurance, the CHD agrees to compile data, maintain records and submit records and reports as required to permit effective enforcement of the nondiscrimination laws, and to permit Department personnel during normal working hours to review and copy such records, books and accounts, access such facilities, and interview such personnel as needed to ascertain compliance with the non-discrimination laws. If there are any violations of this assurance, the Department of Agriculture shall have the right to seek judicial enforcement of this assurance.

This assurance is given in consideration of and for the purpose of obtaining any and all Federal financial assistance, grants, and loans of Federal funds, reimbursable expenditures, grant or donation of Federal property and interest in property, the detail of Federal personnel, the sale and lease of, and the permission to use Federal property or interest in such property or the furnishing of services without consideration or at a nominal consideration, or at a consideration that is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be served by such sale, lease, or

4. Confidentiality of Data, Files, and Records: The CHD agrees to restrict the use and disclosure of confidential USDA, Women, Infant, and Children (WIC) applicant and participant information as specified in 7 CFR § 246.26(d)(1)(i) in accordance with 7 CFR § 246.26(d)(1)(ii), as applicable.

Attachment IV

Fiscal Year - 2024 - 2025

Indian River County Health Department

Facilities Utilized by the County Health Department

Complete Location (Street Address, City, Zip)	Facility Description And Official Building Name (if applicable) (Admin. Clinic, Envrn Hlth, etc.)	Lease/ Agreement Number	Type of Agreement (Private Lease thru State or County, other - please define)	Complete Legal Name of Owner	SQ Feet	Employee Count (FTE/OPS/ Contract)
1900 27th Street, Vero Beach, Florida, 32960-3383	Administration, HR, Clinic, Vital Statistics, Env. Health, WIC	N/A	County Owned	County Commissioners for Indian River County	36,475	70.84
8445 64th Ave, Wabasso, Florida, 32970	Wabasso Site	N/A	County Owned	County Commissioners for Indian River County	5,556	7.00

Facility - a fixed site managed by DOH/CHD personnel for the purpose of providing or supporting public health services. Includes county-owned, state-owned, and leased facilities. Includes DOH/CHD warehouse and administrative sites. Includes facilities managed by DOH/CHD that may be shared with other organizations. Does not include schools, jails or other facilities where DOH/CHD staff are out-posted or sites where services are provided on an episodic basis.

**ATTACHMENT V
INDIAN RIVER COUNTY HEALTH DEPARTMENT
SPECIAL PROJECTS SAVINGS PLAN**

CASH RESERVED OR ANTICIPATED TO BE RESERVED FOR PROJECTS

<u>CONTRACT YEAR</u>	<u>STATE</u>	<u>COUNTY</u>	<u>TOTAL</u>
2023-2024*	\$ _____ 0	\$ _____ 0	\$ _____ 0
2024-2025**	\$ _____ 0	\$ _____ 0	\$ _____ 0
2025-2026***	\$ _____ 0	\$ _____ 0	\$ _____ 0
2026-2027***	\$ _____ 0	\$ _____ 0	\$ _____ 0
PROJECT TOTAL	\$ _____ 0	\$ _____ 0	\$ _____ 0

SPECIAL PROJECTS CONSTRUCTION/RENOVATION PLAN

PROJECT NUMBER: _____

PROJECT NAME: _____

LOCATION/ADDRESS: _____

PROJECT TYPE: NEW BUILDING _____ ROOFING _____

RENOVATION _____ PLANNING STUDY _____

NEW ADDITION _____ OTHER _____

SQUARE FOOTAGE: _____ 0

PROJECT SUMMARY: *Describe scope of work in reasonable detail.*

START DATE (*Initial expenditure of funds*) : _____

COMPLETION DATE: _____

DESIGN FEES: \$ _____ 0

CONSTRUCTION COSTS: \$ _____ 0

FURNITURE/EQUIPMENT: \$ _____ 0

TOTAL PROJECT COST: \$ _____ 0

COST PER SQ FOOT: \$ _____ 0

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects and mobile health vans.

* Cash balance as of 9/30/24

** Cash to be transferred to FCO account.

*** Cash anticipated for future contract years.