

**Summary**  
**Board Bill Number 166**  
**Introduced by Alderwoman Christine Ingrassia**  
**January 21, 2021**

This Board Bill authorizes the Department of Health (the “DOH”) to accept COVID-19 response grant assistance, through the Epidemiology and Laboratory Capacity -- Enhancing Detection (“ELC-ED”) Expansion award of up to \$1,444,604.00 from the Missouri Department of Health and Senior Services (“MDHSS”), for the grant purposes of providing funding assistance with local efforts for COVID-19 related response; authorizing the expenditure of NACCHO IOPSLL grant funds for grant purposes, and to fulfill the obligations of said grant.

**BOARD BILL NUMBER 166 INTRODUCED BY: ALDERWOMAN CHRISTINE  
INGRASSIA**

1           An Ordinance recommended by the Board of Estimate and Apportionment authorizing  
2 the Department of Health (the “DOH”) to accept COVID-19 response grant assistance, through  
3 the Epidemiology and Laboratory Capacity -- Enhancing Detection (“ELC-ED”) Expansion  
4 award of up to \$1,444,604.00 from the Missouri Department of Health and Senior Services  
5 (“MDHSS”), for the grant purposes of providing funding assistance with local efforts for  
6 COVID-19 related response; authorizing the expenditure of ELC ED Expansion grant funds for  
7 grant purposes, and to fulfill the obligations of said grant; and containing an emergency clause.

8 **BE IT ORDAINED BY THE CITY OF ST. LOUIS AS FOLLOWS:**

9           **SECTION ONE.** There is hereby appropriated up to One Million Four Hundred Forty-  
10 Four Thousand Six Hundred Four Dollars (\$1,444,604.00) of the Epidemiology and Laboratory  
11 Capacity -- Enhancing Detection (“ELC-ED”) Expansion grant award to the Department of Health  
12 (“DOH”). Said appropriation is limited to expenditures covered entirely by the ELC-ED Expansion  
13 grant funds. The DOH is hereby authorized to accept such funds. The Director of the Department  
14 of Health is hereby authorized to expend such funds, and to make, negotiate, and execute any and  
15 all contracts or other documents on behalf of the City, to the extent such funds are received, for  
16 the purposes set forth in the grant (**See ATTACHMENT A**).

17           **SECTION TWO.** Emergency Clause. This being an ordinance for the preservation of the  
18 public peace, health and safety, it is hereby declared to be an emergency measure within the  
19 meaning of Sections 19 and 20 of Article IV of the Charter of the City of St. Louis, and therefore,  
20 this ordinance shall become effective immediately upon its passage and approval by the Mayor.

**Board Bill Number 166  
Attachment A**



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
**PROGRAM SERVICES CONTRACT**

This contract is entered into by and between the State of Missouri, Department of Health and Senior Services (Department/state agency) and the below named entity/individual (Contractor). The contract consists of the contract signature page, the scope of work; any attachments referenced and incorporated herein; the terms and conditions; and any written amendments made in accordance with the provisions contained herein. This contract expresses the complete agreement of the parties. By signing below, the Contractor and Department agree to all the terms and conditions set forth in this contract.

To the extent that this contract involves the use, in whole or in part, federal funds, the signature of the Contractor's authorized representative on the contract signature page indicates compliance with the Certifications contained in Attachment A which is attached hereto and is incorporated by reference as if fully set forth herein.

|                                    |   |  |
|------------------------------------|---|--|
| <b>Tracking #</b><br>51320         | <b>Contract Title:</b><br>EPIDEMIOLOGY AND LABORATORY CAPACITY (ELC) ENHANCING DETECTION (ED) EXPANSION |  |
| <b>Contract Start:</b><br>7/1/2021 | <b>Contract End:</b><br>6/30/2023   | <b>Questions/Please Contact:</b><br>PROCUREMENT UNIT @ (573)751-6471 |
| <b>Contract #:</b>                 |   | <b>Amend #:</b><br>00  |

**PLEASE VERIFY/COMPLETE - TYPE OR PRINT - SIGNATURE REQUIRED**

|   |                                 |
|---|---------------------------------|
| <b>NAME OF ENTITY/INDIVIDUAL (Contractor)</b><br>ST LOUIS CITY DEPARTMENT OF HEALTH & HOSPITALS                           |                                 |
| <b>DOING BUSINESS AS (DBA) NAME</b>   |                                 |
| <b>MAILING ADDRESS</b><br>1520 MARKET STREET P O BOX 14702  |                                 |
| <b>CITY, STATE, and ZIP CODE</b><br>ST LOUIS MO 63103   |                                 |
| <b>REMIT TO (PAYMENT) ADDRESS (if different from above)</b>   |                                 |
| <b>CITY, STATE, and ZIP CODE</b>  |                                 |
| <b>CONTACT PERSON</b>   | <b>EMAIL ADDRESS</b>            |
| <b>PHONE NUMBER</b>   | <b>FAX NUMBER</b>               |
| <b>TAXPAYER ID NUMBER (TIN)</b><br>*****3231  | <b>DUNS NUMBER</b><br>620680223 |
| <b>CONTRACTOR'S AUTHORIZED SIGNATURE</b>  | <b>DATE</b>                     |
| <b>PRINTED NAME</b>   | <b>TITLE</b>                    |
| <b>MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES<br/>DIRECTOR OF DIVISION OF ADMINISTRATION OR DESIGNEE SIGNATURE</b> | <b>DATE</b>                     |



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| <b>CITY, STATE, and ZIP CODE</b>   |                                 |
| <b>CONTACT PERSON</b>  | <b>EMAIL ADDRESS</b>            |
| <b>PHONE NUMBER</b>  | <b>FAX NUMBER</b>               |
| <b>TAXPAYER ID NUMBER (TIN)</b><br>*****3231   | <b>DUNS NUMBER</b><br>135747843 |
| <b>CONTRACTOR'S AUTHORIZED SIGNATURE</b>   | <b>DATE</b>                     |
| <b>PRINTED NAME</b>  | <b>TITLE</b>                    |
| <b>DEPARTMENT OF HEALTH AND SENIOR SERVICES<br/>DIRECTOR OF DIVISION OF ADMINISTRATION OR DESIGNEE SIGNATURE</b> | <b>DATE</b>                     |



**CONTRACT FUNDING SOURCE(S)**

The Contract Funding Source(s) identifies the total amount of funding and federal funding source(s) expected to be used over the life of this contract. The CFDA number is the pass-through identification number for your Schedule of Expenditures of Federal Awards (SEFA), if one is required. You may reconcile your financial records to actual payment documents by going to the vendor services portal at <https://www.vendor-services.mo.gov/>. If the funding information is not available at the time the contract is issued, the Contractor will be notified in writing by the Department. Please retain this information with your official contract files for future reference.

|                     |   |               |              |                     |                |
|---------------------|---|---------------|--------------|---------------------|----------------|
| Tracking #          | 51320   | State: 0%     | \$0.00       | Federal: 100%       | \$1,444,604.00 |
| Contract Title:     | EPIDEMIOLOGY AND LABORATORY CAPACITY (ELC) ENHANCING DETECTION (ED) EXPANSION                                   |               |              |                     |                |
| Contract Start:     | 7/1/2021  | Contract End: | 6/30/2023    | Amend#:             | 00             |
| Contract #:         |   |               |              |                     |                |
| Vendor Name:        | ST LOUIS CITY DEPARTMENT OF HEALTH & HOSPITALS  |               |              |                     |                |
| CFDA: 93.323        | Research and Development: N   |               |              |                     |                |
| CFDA Name:          | EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)  |               |              |                     |                |
| Federal Agency:     | DEPARTMENT OF HEALTH AND HUMAN SERVICES / CENTERS FOR DISEASE CONTROL AND PREVENTION                            |               |              |                     |                |
| Federal Award:      | 6NU50CK000546-02  |               |              |                     |                |
| Federal Award Name: | CK19-1904 EPIDEMIOLOGY AND LABORATORY CAPACITY FOR PREVENTION AND CONTROL OF EMERGING INFECTIOUS DISEASES (ELC) |               |              |                     |                |
| Federal Award Year: | 2020  | DHSS #:       | CN000546-02S | Federal Obligation: | \$1,444,604.00 |

\* The Department will provide this information when it becomes available.

**Project Description:**

To assist with local COVID-19 response efforts.

# BOARD BILL NUMBER 166

## FISCAL NOTE

Preparer's Name: Craig Schmid

Phone Number or Email Address (will be available publicly): (314) 657-1534

Bill Sponsor : Alderwoman Ingrassia

|                           |   |
|---------------------------|---|
| <b>Bill Synopsis:</b>     | This Board Bill would authorize the Department of Health (the "DOH") to accept COVID-19 response grant assistance, through the Epidemiology and Laboratory Capacity -- Enhancing Detection ("ELC-ED") Expansion award of up to \$1,444,604.00 from the Missouri Department of Health and Senior Services ("MDHSS"), for the grant purposes of providing funding assistance with local efforts for COVID-19 related response; authorizing the expenditure of NACCHO IOPSLG grant funds for grant purposes, and to fulfill the obligations of said grant. |
| <b>Type of Impact:</b>    | COVID-19 related response for case investigation and contact tracing; public health surveillance which includes data reporting, analysis and visualization; COVID-19 testing; Health education and information that promotes the reduction of community spread; and professional development activities aimed at building infection prevention and control and outbreak response expertise.   |
| <b>Agencies Affected:</b> | Department of Health (the "DOH")  |

### SECTION A

#### Does this bill authorize:

- An expansion of services which entails additional costs beyond that approved in the current adopted city budget?   X   Yes No. (grant covered only)
- An undertaking of a new service for which no funding is provided in the current adopted city budget?        Yes   X   No.

(09/2019)

- A commitment of city funding in the future under certain specified conditions? \_\_\_\_\_Yes\_X\_No.
- An issuance of bonds, notes and lease-purchase agreements which may require additional funding beyond that approved in the current adopted city budget? \_\_\_\_\_Yes\_X\_No.
- An execution or initiation of an activity as a result of federal or state mandates or requirements? \_\_\_\_\_Yes\_X\_No.
- A capital improvement project that increases operating costs over the current adopted city budget? \_\_\_\_\_Yes\_X\_No.
- A capital improvement project that requires funding not approved in the current adopted city budget or that will require funding in future years? \_Yes \_X\_No.

**If the answer is yes to any of the above questions, then a fiscal note must be attached to the board bill. Complete Section B of the form below.**

**SECTION B**

- Does the bill require the construction of any new physical facilities?\_\_\_\_\_Yes X No.
  - If yes, describe the facilities and provide the estimated cost:
   
\_\_\_\_\_
   
\_\_\_\_\_
   
\_\_\_\_\_
   
\_\_\_\_\_
   
\_\_\_\_\_
- Is the bill estimated to have a direct fiscal impact on any city department or office?
   
\_\_\_\_\_Yes \_X\_No.
  - If yes, explain the impact and the estimated cost:
- Does the bill create a program or administrative subdivision? \_\_\_\_\_Yes X No.
  - If yes, then is there a similar existing program or administrative subdivision?
   
\_\_\_\_\_Yes\_\_\_\_\_No.
  - If yes, explain the how the proposed programs or administrative subdivisions may overlap:
   
\_\_\_\_\_
   
\_\_\_\_\_
   
\_\_\_\_\_

- Describe the annual operating, equipment, and maintenance costs that would result from the proposed bill, as well as any funding sources: NA

Complete the chart below to list the total estimated expenditures required of the City resulting from the proposed board bill and any estimated savings or additional revenue.

| <b>Financial Estimate of Impact on General Fund</b>  |                                |                      |                      |
|--|--------------------------------|----------------------|----------------------|
| <b>Fiscal Impact</b>                                 | <b><u>Year 1 (current)</u></b> | <b><u>Year 2</u></b> | <b><u>Year 3</u></b> |
| <b>Additional Expenditures</b>                       | 0                              | 0                    | 0                    |
| <b>Additional Revenue</b>                            | 0                              | 0                    | 0                    |
| <b>Net</b>   | 0                              | 0                    | 0                    |
| <b>Financial Estimate of Impact on Special Funds</b> |                                |                      |                      |
| <b>Fiscal Impact</b>                                 | <b><u>Year 1 (current)</u></b> | <b><u>Year 2</u></b> | <b><u>Year 3</u></b> |
| <b>Additional Expenditures</b>                       | 0                              | 0                    | 0                    |
| <b>Additional Revenue</b>                            | 0                              | 0                    | 0                    |
| <b>Net</b>   | 0                              | 0                    | 0                    |

- Describe any assumptions used in preparing this fiscal note:

Acceptance and expenditure of grant funds for the purposes authorized only.

- List any sources of information (including any City officials, agencies, or departments) used in preparing this fiscal note:
- Have the financial estimates of this bill been verified by the City Budget Division?  
 Yes  No.
  - If yes, by whom? \_\_\_\_\_.