

September 11, 2018

TO:

Mayor Teresa Jacobs

-AND-

Board of County Commissioners

THRU:

Linda Weinberg, Acting Deputy County Administrator

County Administrator's Office

FROM:

John Goodrich, Acting Director J. Voodrich Health Services Dans

SUBJECT:

Annual Standard Contract between the State of Florida Department of Health

and Orange County for Operation of the Orange County Health Department

Consent Agenda - October 2, 2018

The Health Services Department is requesting approval and execution of the annual standard contract between the State of Florida Department of Health and Orange County for operation of the Orange County Health Department. This contract is required by Chapter 154. Florida Statutes.

The Health Department's total contract operating budget for FY 2018-2019 is \$36,003,861. This includes the state share of \$21,519,009 and the county/local share of \$14,484,852. Of the county amount, \$1,419,449 is a cash contribution given to the Health Department in quarterly installments of \$354,862.25.

The remainder of the county/local contribution includes fee revenue, Medicare billings, Medicaid billings, Citizens' Commission for Children funding, and Federal Ryan White A, B, C and D funding. Fee revenues and Medicaid/Medicare billings are collected by the Health Department and deposited directly into its trust fund.

The contract includes a spending plan by service area with the anticipated amount of services to be provided. All funds are held by the state in a separate trust fund with quarterly service and expenditure reports provided to the county.

This contract is a continuation of the contracting provisions set forth in Florida Statute 154 and has been previously reviewed by all necessary state and local entities.

ACTION REQUESTED:

Approval and execution of Contract between Orange County Board of County Commissioners and State of Florida Department of Health for Operation of the Orange County Health Department Contract Year 2018-2019. Orange County's total cash contribution in the amount of \$1,419,449 will be submitted to the Health Department in quarterly installments of \$354,862.25.

Attachments

BCC Mtg. Date: October 2, 2018

CONTRACT BETWEEN ORANGE COUNTY BOARD OF COUNTY COMMISSIONERS AND STATE OF FLORIDA DEPARTMENT OF HEALTH FOR OPERATION OF THE ORANGE COUNTY HEALTH DEPARTMENT CONTRACT YEAR 2018-2019

This contract is made and entered into between the State of Florida, Department of Health ("State") and the Orange County Board of County Commissioners ("County"), through their undersigned authorities, effective October 1, 2018.

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 "promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations."
- C. Orange 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 in order 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 are hereby acknowledged, the parties hereto agree as follows:

- 1. <u>RECITALS</u>. The parties mutually agree that the foregoing recitals are true and correct and incorporated herein by reference.
- 2. <u>TERM</u>. The parties mutually agree that this contract shall be effective from October 1, 2018, through September 30, 2019, or until a written contract replacing this contract is entered into between the parties, whichever is later, unless this contract is otherwise terminated pursuant to the termination provisions set forth in paragraph 8. below.
- 3. <u>SERVICES MAINTAINED BY THE CHD</u>. The parties mutually agree that the CHD shall provide those services as set forth on Part III of Attachment II hereof, in order 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 which are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment which 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 which protect the health of the general public through the detection, control, and eradication of diseases which 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. <u>FUNDING</u>. 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 set forth 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 \$19,696,248 (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\$1,419,449 (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 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/decrease, the CHD will revise the Attachment II and send a copy of the revised pages to the County and the Department of Health, Office of Budget and Revenue Management. If the County initiates the increase/decrease, the County shall notify the CHD. The CHD will then revise the Attachment II and send a copy of the revised pages to the Department of Health, 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 Orange County 6101 Lake Ellenor Drive Orlando, FL 32809

- 5. <u>CHD DIRECTOR/ADMINISTRATOR</u>. Both parties agree the director/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 Deputy Secretary for County Health Systems. The director/administrator shall be selected by the State with the concurrence of the County. The director/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. <u>ADMINISTRATIVE POLICIES AND PROCEDURES</u>. 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 set forth in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel 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 Department of Health purchasing contract has been implemented for those goods or services. In such cases, the CHD director/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 in accordance with 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 in accordance with the Generally Accepted Accounting Principles (GAAP), as promulgated by the Governmental Accounting Standards Board (GASB), and the requirements of federal or state law. These records shall be maintained as required by the Department of Health 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 are 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:
 - The revenue and expenditure requirements in the Florida Accounting Information Resource (FLAIR) System;
 - 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;
 - iii. Financial procedures specified in the Department of Health's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda;
 - 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 Orange County.
- e. That any surplus/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/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/deficit funds accruing to the State and County is determined each month and at contract year-end. Surplus funds may be applied toward the funding requirements of each participating governmental entity 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 which clearly illustrates the amount which has been credited to each participating governmental entity. 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/administrator determines that an emergency exists wherein a time delay would endanger the public's health and the Deputy Secretary for County Health Systems has approved the transfer. The 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 CPA 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 and may be in conjunction with audits performed by County government. If audit exceptions are found, then the director/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 a period of five (5) years after termination of this contract. If an audit has been initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings.
- k. The CHD shall maintain 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 Department of Health 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 with respect to client confidentiality.
- I. 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, except as otherwise permitted for some purchases using County procedures pursuant to paragraph 6.b.
- 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 of his/her right to a fair hearing to the final governing authority of the agency. 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 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:
 - The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report;
 - 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 Department of Health, 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 is delayed due to circumstances beyond the CHD's control:
 - March 1, 2019 for the report period October 1, 2018 through December 31, 2018;
 - ii. June 1, 2019 for the report period October 1, 2018 through March 31, 2019;
 - iii. September 1, 2019 for the report period October 1, 2018 through June 30, 2019; and
 - iv. December 1, 2019 for the report period October 1, 2018 through September 30, 2019.

7. <u>FACILITIES AND EQUIPMENT</u>. 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 for 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. <u>TERMINATION</u>.

- a. <u>Termination at Will</u>. This contract may be terminated by either party without cause upon no less than one-hundred eighty (180) calendar days notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.
- b. <u>Termination Because of Lack of Funds</u>. In the event funds to finance this contract become unavailable, either party may terminate this contract upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.
- c. <u>Termination for Breach</u>. This contract may be terminated by one party, upon no less than thirty (30) days notice, because of the other party's failure to perform an obligation hereunder. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery. Waiver of 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. <u>MISCELLANEOUS</u>. The parties further agree:

- a. <u>Availability of Funds</u>. If this contract, any renewal hereof, or any term, performance or payment hereunder, extends beyond the fiscal year beginning July 1, 2019, it is agreed that the performance and payment under this contract are contingent upon an annual appropriation by the Legislature, in accordance with section 287.0582, Florida Statutes.
- b. <u>Contract Managers</u>. The name and address of the contract managers for the parties under this contract are as follows:

For the State: Kevin M. Sherin, MD, MPH, MBA	For the County: John Goodrich
Name	Name
CHD Director/Health Officer	Assistant Director, Health Services
Title	Title

Lake Ellenor Drive

2002A East Michigan Street

Orlando, FL 32809

Orlando, FL 32806

Address

Address

<u>407-858-1434</u>

407-836-8910

Telephone

Telephone

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

c. <u>Captions</u>. 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.

In WITNESS THEREOF, the parties hereto have caused this 8 page contract, with its attachments as referenced, including Attachment I (two pages), Attachment II (seven 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, 2018.

BOARD OF COUNTY COMMISSIONERS FOR ORANGE COUNTY

STATE OF FLORIDA DEPARTMENT OF HEALTH

SIGNED BY: 1/2 dalchanda	SIGNED BY:
NAME: Teresa Jacobs	NAME: Celeste Philip, MD, MPH
TITLE: Orange County Mayor	TITLE: Surgeon General and Secretary
DATE: 10. 2.18	DATE: 10/39/18
SE COUNTY	The state of the s
ATTESTED TO:	
SIGNED BY: Latie Smeet	SIGNED BY: Keni Teen
NAME: Katie Smith	NAME: Kevin M. Sherin, MD, MPH, MBA
TITLE: Deputy Clerk	TITLE: CHD Director/Health Officer
DATE: GCT 0 2 2018	DATE: 8-16-18

ORANGE 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>	Requirement
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

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			levels as documented in Florida SHOTS and supported by CHD Guidebook policies and technical assistance guidance.
7	7.	Environmental Health	Requirements as specified in Environmental Health Programs Manual 150-4* and DHP 50-21*
8	3.	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.
ξ	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.
1	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.

ORANGE 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 09/30/18	14871	7	2434822	2583539
2.	Drawdown for Contract Year October 1, 2018 to September 30, 2019	-14871	7	-441098	-589815
3.	Special Capital Project use for Contract Year October 1, 2018 to September 30, 2019)	0	0
4.	Balance Reserved for Contingency Fund October 1, 2018 to September 30, 2019)	1993724	1993724

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

ORANGE COUNTY HEALTH DEPARTMENT

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
1. GENE	RAL REVENUE · STATE					
015040	AIDS PATIENT CARE	300,000	0	300,000	0	300,000
015040	AIDS PREVENTION & SURVEILLANCE - GENERAL REVENUE	192,213	0	192,213	0	192,213
015040	CHD · TB COMMUNITY PROGRAM	684,320	0	684,320	0	684,320
015040	SEXUALLY TRANSMITTED DISEASE CONTROL PROGRAM GR	109,503	0	109,503	0	109,503
015040	DENTAL SPECIAL INITIATIVE PROJECTS	5,977	0	5,977	0	5,977
015040	FAMILY PLANNING GENERAL REVENUE	136,497	0	136,497	0	136,497
015040	FLORIDA SPRINGS AND AQUIFER PROTECTION ACT	145,879	0	145,879	0	145,879
015040	HEPATITIS AND LIVER FAILURE PREVENTION & CONTROL	36,000	0	36,000	0	36,000
015040	PRIMARY CARE PROGRAM	790,578	0	790,578	0	790,578
015040	SCHOOL HEALTH SERVICES · GENERAL REVENUE	878,827	0	878,827	0	878,827
015050	CHD GENERAL REVENUE NON-CATEGORICAL	6,126,072	0	6,126,072	0	6,126,072
GENERA	AL REVENUE TOTAL	9,405,866	0	9,405,866	0	9,405,866
2. NON	GENERAL REVENUE - STATE					
015010	ENVIRONMENTAL BIOMEDICAL WASTE PROGRAM	26,153	0	26,153	0	26,153
015010	TOBACCO STATE AND COMMUNITY INTERVENTIONS	309,192	0	309,192	0	309,192
NON GE	NERAL REVENUE TOTAL	335,345	0	335,345	0	335,345
3. FEDE	RAL FUNDS · STATE					
007000	AIDS SURVEILLANCE · CORE	285,628	0	285,628	0	285,628
007000	STATEWIDE ASTHMA PROGRAM	80,000	0	80,000	0	80,000
007000	WIC BREASTFEEDING PEER COUNSELING PROG	146,741	0	146,741	0	146,741
007000	COMPREHENSIVE COMMUNITY CARDIO - PHBG	35,000	0	35,000	0	35,000
007000	CMS·MCH PURCHASED CLIENT SERVICES	42,368	0	42,368	0	42,368
007000	EPI/LAB CAPACITY INFECT DISEASE EBOLA SUPPL HAI	44,000	0	44,000	0	44,000
007000	FAMILY PLANNING TITLE X · GRANT	246,024	0	246,024	0	246,024
007000	IMMUNIZATION · AFIX	40,725	0	40,725	0	40,725
007000	IMMUNIZATION FIELD STAFF	9,000	0	9,000	0	9,000
007000	IMMUNIZATION ACTION PLAN	183,271	0	183,271	0	183,271
. 007000	MCH SPECIAL PRJCT UNPLANNED PREGNANCY	62,507	0	62,507	0	62,507
007000	MCH SPEC PRJ SOCIAL DETERMINANTS HLTH COMM EDU	32,525	0	32,525	0	32,525
007000	MCH SPECIAL PROJCT DENTAL	10,842	0	10,842	0	10,842
007000	MCH BLOCK GRANT FLORIDA'S HEALTHY BABIES	10,842	0	10,842	0	10,842
007000	ELC AFFORDABLE CARE ACT MENINGOCOCCAL	53,700	0	53,700	0	53,700
007000	BASE COMMUNITY PREPAREDNESS CAPABILITY	140,262	0	140,262	0	140,262
007000	BASE PUB HLTH SURVEILLANCE & EPI INVESTIGATION	70,084	0	70,084	0	70,084
007000	CRI MEDICAL COUNTERMEASURES DISPENSING	182,916	0	182,916	0	182,916
007000	AIDS PREVENTION	1,155,870	0	1,155,870	0	1,155,870
007000	MORBIDITY AND RISK BEHAVIOR SURVEILLANCE	54,464	0	54,464	0	54,464
007000	STATE INDOOR RADON GRANT PROGRAM	9,000	0	9,000	0	9,000
007000	IMPROVING STD PROGRAMS	313,999	0	313,999	0	313,999
007000	FLORIDA STD SURVEILLANCE NETWORK PART A	9,200	0	9,200	0	9,200
007000	TB CONTROL PROJECT	110,360	0	110,360	0	110,360
007000	WIC PROGRAM ADMINISTRATION	5,328,461	. 0	5,328,461	0	5,328,461
					Attachment II Pi	art II-Page 1 of 4

ORANGE COUNTY HEALTH DEPARTMENT

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
007000 ZIKA ELC M1 ARE	OVIRAL DISEASE-SUPPLEMENTAL	59,000	0	59,000	0	59,00
015075 INSPECTIONS OF	SUMMER FEEDING PROGRAM · DOE	26,000	0	26,000	0	26,000
015075 REFUGEE HEALT	H CHD CASE MANAGERS	58,666	0	58,666	0	58,660
015075 SUPPLEMENTAL	SCHOOL HEALTH	266,729	0	266,729	0	266,729
015075 REFUGEE HEALT	H SCREENING REIMBURSEMENT ADMIN	24,000	0	24,000	0	24,000
015075 REFUGEE HEALT	H SCREENING REIMBURSEMENT SERVICES	200,000	0	200,000	0	200,000
018005 RYAN WHITE TIT	LE II ADAP DRUG REBATES	249,554	0	249,554	0	249,55
018005 RYAN WHITE TIT	LE II ADAP DRUG REBATES	81,987	0	81,987	0	81,98
018005 AIDS DRUG ASSIS	TANCE PROGRAM ADMIN HQ	214,755	0	214,755	0	214,75
018005 RYAN WHITE TIT	LE II CARE GRANT	142,557	0	142,557	0	142,55
EDERAL FUNDS TOTAL		9,981,037	0	9,981,037	0	9,981,03
. FEES ASSESSED BY STA	TE OR FEDERAL RULES - STATE					
001020 CHD STATEWIDE	ENVIRONMENTAL FEES	911,000	0	911,000	0	911,000
001092 CHD STATEWIDE	ENVIRONMENTAL FEES	612,000	0	612,000	0	612,000
001206 ON SITE SEWAGE	DISPOSAL PERMIT FEES	60,000	0	60,000	0	60,000
001206 SANITATION CER	TIFICATES (FOOD INSPECTION)	20,000	0	20,000	0	20,000
001206 SEPTIC TANK RE	SEARCH SURCHARGE	2,500	0	2,500	0	2,500
001206 SEPTIC TANK VA	RIANCE FEES 50%	2,500	0	2,500	0	2,50
001206 PUBLIC SWIMMIN	G POOL PERMIT FEES-10% HQ TRANSFER	15,000	0	15,000	0	15,000
001206 DRINKING WATE	R PROGRAM OPERATIONS	1,350	0	1,350	0	1,350
001206 REGULATION OF	BODY PIERCING SALONS	754	0	754	Ö	75
001206 TANNING FACILI	PIES	1,250	0	1,250	0	1,250
001206 ONSITE SEWAGE	TRAINING CENTER	. 9,000	0	9,000	0	9,000
001206 TATTO PROGRAM	ENVIRONMENTAL HEALTH	8,600	0	8,600	0	8,600
001206 MOBILE HOME &	RV PARK FEES	3,900	0	3,900	0	3,900
EES ASSESSED BY STAT	E OR FEDERAL RULES TOTAL	1,647,854	0	1,647,854	0	1,647,85
OTHER CASH CONTRIB	JTIONS · STATE:					
		0	0	0	0	140 711
090001 DRAW DOWN FRO THER CASH CONTRIBUT		148,717 148,717	0	148,717 148,717	0	148,71°
. MEDICAID - STATE/COU	NUDV					
001056 CHD CLINIC FEE		0	112,000	112,000	. 0 .	112,00
001057 CHD CLINIC FEE		0	841,046	841,046	0	841,04
001147 CHD CLINIC FEES		0	128,360	128,360	0	128,36
001148 CHD CLINIC FEES		0	881,544	881,544	0	881,54
MEDICAID TOTAL	,	0	1,962,950	1,962,950	0	1,962,950
. ALLOCABLE REVENUE	STATE:					
004010 CHD CLINIC FEE	3	50	0	50	0	50
004010 VITAL STATISTIC	S CERTIFIED RECORDS	50	. 0	50	0	50
038000 CHD CLINIC FEE	5	58	0	58	0	5
		32	0	32	0	3:

ORANGE COUNTY HEALTH DEPARTMENT

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Truet Fund (cash)	Other Contribution	Total
ALLOCA	BLE REVENUE TOTAL	190	0	190	0	190
8. OTHE	R STATE CONTRIBUTIONS NOT IN CHD TRUST FUND · STATE					
	ADAP	0	0	. 0	7,991,154	7,991,154
	PHARMACY DRUG PROGRAM	0	0	0	103,714	103,714
	WIC PROGRAM	0	0	0	26,693,425	26,693,425
	BUREAU OF PUBLIC HEALTH LABORATORIES	0	0	0	162,384	162,384
	IMMUNIZATIONS	0	0	0	2,041,894	2,041,894
OTHER	STATE CONTRIBUTIONS TOTAL	0	0	0	36,992,571	36,992,571
9. DIRE	CT LOCAL CONTRIBUTIONS - BCC/TAX DISTRICT					
008005	CHD LOCAL REVENUE & EXPENDITURES	0	1,419,449	1,419,449	0	1,419,449
008040	RYAN WHITE PART A	0	510,002	510,002	0	510,002
008040	RYAN WHITE PART A	0	228,123	228,123	0	228,123
DIRECT	COUNTY CONTRIBUTIONS TOTAL	0	2,157,574	2,157,574	0	2,157,574
10. FEE	S AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COU	NTY				
001025	CHD CLINIC FEES	0	6,130	6,130	0	6,130
001073	CHD CLINIC FEES	0	2,750	2,750	0	2,750
001077	CHD CLINIC FEES	0	526,054	526,054	0	526,054
001077	GENERAL CLINIC RABIES SERVICES & DRUG PURCHASES	0	20,500	20,500	0	20,500
001094	CHD LOCAL ENVIRONMENTAL FEES	0	937,300	937,300	0	937,300
001110	CHD CLINIC FEES	0	13	13	0	13
001110	VITAL STATISTICS CERTIFIED RECORDS	0	1,040,000	1,040,000	0	1,040,000
FEES A	UTHORIZED BY COUNTY TOTAL	0	2,532,747	2,532,747	0	2,532,747
11. OTH	ER CASH AND LOCAL CONTRIBUTIONS - COUNTY					
001029	CHD CLINIC FEES	0	26,050	26,050	0	26,050
001054	CHD CLINIC FEES	0	55,000	55,000	0	55,000
001090	CHD CLINIC FEES	0	52,150	52,150	0	52,150
005000	CHD LOCAL REVENUE & EXPENDITURES	0	25,726	25,726	0	25,726
007010	HLTHY START INTIATIVE-RACIAL/ETHNIC DISPARITIES	0	506,364	506,364	0	506,364
007010	RYAN WHITE TITLE IV/PART D · TO CHD	0	66,375	66,375	0	66,375
007010	RYAN WHITE TITLE IV/PART D · TO CHD	0	763,303	763,303	0	763,303
007010	RYAN WHITE TITLE III · DIRECT TO CHD	0	818,420	818,420	0	818,420
007010	RYAN WHITE TITLE III · DIRECT TO CHD	0	272,806	272,806	0	272,806
007099	CHD FEDERAL & LOCAL INDIRECT EARNINGS	0	94,000	94,000	0	94,000
010300	STATE UNDERGROUND PETROLEUM RESPONSE ACT	0	17,000	17,000	0	17,000
010300	CHD SALE OF SERVICES IN OR OUTSIDE OF STATE GOVT	0	18,000	18,000	0	18,000
010400	CHD SALE OF SERVICES IN OR OUTSIDE OF STATE GOVT	0	8,400	8,400	0	8,400
010500	CHD SALE OF SERVICES IN OR OUTSIDE OF STATE GOVT	0	29,834	29,834	0	29,834
011000	REVENUE CONTRACT/MOA W/NO REPORTING REQUIREMENT	0	198,928	198,928	0	198,928
011000	CHD LOCAL REVENUE & EXPENDITURES	0	611,145	611,145	0	611,145
011000	RAYN WHITE TITLE II CONSORTIA SERVICES	0	104,625	104,625	0	104,625
011000	RAYN WHITE TITLE II CONSORTIA SERVICES	0	34,875	34,875	0	34,875
	CHD HEALTHY START COALITION CONTRACT	0	2,439,870	2,439,870	0	2,439,870

ORANGE COUNTY HEALTH DEPARTMENT

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
011001 HEALTHY START MEDIPASS WAIVER · COALITION TO CH	HD 0	836,884	836,884	0	836,884
011001 HEALTHY START NURSE FAM PARTNERSHIP EXPAND CI	HD 0	408,538	408,538	0	408,538
012020 CHD LOCAL ENVIRONMENTAL FEES	0	2,000	2,000	0	2,000
090002 DRAW DOWN FROM PUBLIC HEALTH UNIT	0	441,098	441,098	0	441,098
OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL	0	7,831,391	7,831,391	0	7,831,391
12. ALLOCABLE REVENUE - COUNTY					
004010 CHD CLINIC FEES	0	50	50	0	50
004010 VITAL STATISTICS CERTIFIED RECORDS	0	50	50	0	50
038000 CHD CLINIC FEES	. 0	58	58	0	58
038000 VITAL STATISTICS CERTIFIED RECORDS	0	32	32	0	32
COUNTY ALLOCABLE REVENUE TOTAL	0	190	190	0	190
13. BUILDINGS - COUNTY					
ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	1,240,000	1,240,000
OTHER (Specify)	0	0	0	0	0
UTILITIES	0	0	. 0	10,995	10,995
BUILDING MAINTENANCE	0	0	0	0	0
GROUNDS MAINTENANCE	0	0	0	78,731	78,731
INSURANCE	0	0	0	0	0
OTHER (Specify)	. 0	0	0	0	0
OTHER (Specify)	0	0	0	0	0
BUILDINGS TOTAL	0	0	0	1,329,726	1,329,726
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	21,519,009	14,484,852	36,003,861	38,322,297	74,326,158

ORANGE COUNTY HEALTH DEPARTMENT
Part III, Planned Staffing, Clients, Services and Expenditures By Program Service Area Within Each Level of Service October 1, 2018 to September 80, 2019

				On	actarly Ryn	oditure Pia				
	Proi	Clients B	Newstyre	144	and 5	and	111			Grand
	(0.00)	Unita	Visite		(Whole dol	ara only)		State	Clounty	Total .
A. COMMUNICABLE DISEASE CONTROL:										
IMMUNIZATION (101)	16.82	11,025	13,571	256,694	299,403	256,694	299,403	972,821	139,373	1,112,194
SEXUALLY TRANS. DIS. (102)	24.09	4,133	5,519	386,962	451,343	386,962	451,343	715,342	961,268	1,676,610
HIV/AIDS PREVENTION (08A1)	17.99	0	6,920	345,696	403,212	345,696	403,213	1,490,669	7,148	1,497,817
HIV/AIDS SURVEILLANCE (03A2)	7.80	0	4	110,130	128,453	110,130	128,454	473,505	3,662	477,167
IIIV/AIDS PATIENT CARE (03A3)	58.86	3,272	10,137	1,111,316	1,296,214	1,111,316	1,296,214	1,394,287	3,420,778	4,815,060
ADAP (08A4)	4.12	1,399	2,533	57,065	66,559	57,065	66,559	245,543	1,705	247,248
TUBERCULOSIS (104)	19.19	1,132	7,930	347,287	405,068	347,287	405,067	1,141,307	363,402	1,504,709
COMM. DIS. SURV. (106)	11.83	0	7,826	245,978	286,904	245,978	286,904	1,041,741	24,023	1,065,764
HEPATITIS (109)	0.90	237	327	14,870	17,344	14,870	17,343	64,000	427	64,427
PREPAREDNESS AND RESPONSE (116)	4.84	0	159	134,719	157,133	134,719	157,133	583,704	0	583,704
REFUGEE HEALTII (118)	4.51	1,271	2,874	82,178	95,850	82,178	95,850	353,666	2,390	356,056
VITAL RECORDS (180)	9.88	49,788	129,716	171,503	200,037	171,503	200,037	94	742,986	743,080
COMMUNICABLE DISEASE SUBTOTAL	180.83	72,257	187,516	3,264,398	3,807,520	3,264,398	3,807,520	8,476,679	5,667,157	14,143,836
B. PRIMARY CARE:										
CHRONIC DISEASE PREVENTION PRO (210)	3.00	0	139	63,774	74,384	63,774	74,383	276,315	0	276,315
WIC (21W1)	104.73	60,558	429,927	1,508,148	1,759,068	1,508,146	1,759,067	6,516,414	18,015	6,534,429
TOBACCO USE INTERVENTION (212)	4.45	0	23	81,840	95,456	81,840	95,456	354,592	0	354,592
WIC BREASTFEEDING PEER COUNSELING (21W2)	3.07	0	3,216	64,991	75,804	64,991	75,804	281,590	0	281,590
FAMILY PLANNING (223)	11.59	1,357	2,724	200,705	234,097	200,705	234,097	705,028	164,576	869,604
IMPROVED PREGNANCY OUTCOME (225)	39.51	1,815	11,219	676,766	789,365	676,766	789,364	450,049	2,482,212	2,932,261
HEALTHY START PRENATAL (227)	40.27	8,668	28,187	654,035	762,852	654,035	762,853	142,196	2,691,579	2,833,775
COMPREHENSIVE CHILD HEALTH (229)	2.87	453	992	50,892	59,359	50,892	59,359	180,000	40,502	220,502
HEALTHY START CHILD (231)	24.71	12,960	44,223	373,957	436,175	373,957	436,175	382,655	1,237,609	1,620,264
SCHOOL HEALTH (234)	22.25	0	391,421	349,362	407,488	349,362	407,488	1,275,556	238,144	1,513,700
COMPREHENSIVE ADULT HEALTH (237)	1.47	347	427	27,627	32,226	27,629	32,226	0	119,708	119,708
COMMUNITY HEALTH DEVELOPMENT (238)	0.04	0	12	19,886	23,195	19,886	23,195	86,162	0	86,162
DENTAL HEALTH (240)	7.65	2,939	4,653	164,271	191,603	164,271	191,603	126,387	585,361	711,748
PRIMARY CARE SUBTOTAL	265.61	89,097	917,163	4,236,254	4,941,072	4,236,254	4,941,070	10,776,944	7,577,706	18,354,650
C. ENVIRONMENTAL HEALTH:										
Water and Onsite Sewage Programs										
COSTAL BEACH MONITORING (847)	0.00	0	0	0	0	0	0	0	0	0
LIMITED USE PUBLIC WATER SYSTEMS (357)	1.38	94	7,341	21,373	24,929	21,373	24,930	71,000	21,605	92,605
PUBLIC WATER SYSTEM (358)	0.01	0	24	185	215	185	215	0	800	800
PRIVATE WATER SYSTEM (359)	1.66	521	1,548	26,208	30,568	26,208	30,568	0	113,552	113,552
ONSITE SEWAGE TREATMENT & DISPOSAL (361)	20.43	4,743	19,867	297,476	346,969	297,476	346,968	921,859	367,030	1,288,889
Group Total	23.48	5,358	28,780	345,242	402,681	345,242	402,681	992,859	502,987	1,495,846
Facility Programs										
TATTOO FACILITY SERVICES (344)	1.85	0	404	28,283	32,989	28,283	32,989	98,500	24,044	122,544
FOOD HYGIENE (348)	4.48	837	2,496	58,173	67,852	58,173	67,852	188,800	63,250	252,050

ORANGE COUNTY HEALTH DEPARTMENT

Part III, Planned Staffing, Cliente, Services and Expenditures By Program Service Area Within Each Level of Service October 1, 2018 to September 30, 2018

Quartorly Excenditure Plan

				Qu	artorly Expe	mditure Pla	April 10 10 10 10 10 10 10 10 10 10 10 10 10			FAT TO SEE
	17E's (0.00)	China i Uma	Viilta		#nd (Whole dol	ård lare only)	10	State	County	Grand. Total
BODY PIERCING FACILITIES SERVICES (349)	0.23	23	66	3,251	3,792	3,251	3,791	10,950	3,135	14,085
GROUP CARE FACILITY (351)	2.56	384	844	39,169	45,686	39,169	45,686	0	169,710	169,710
MIGRANT LABOR CAMP (352)	0.11	4	35	1,354	1,579	1,354	1,580	5,750	117	5,867
HOUSING & PUB. BLDG. (353)	0.42	278	298	6,212	7,245	6,212	7,244	0	26,913	26,913
MOBILE HOME AND PARK (354)	0.72	131	372	12,138	14,158	12,138	14,158	43,500	9,092	52,592
POOLS/BATHING PLACES (360)	10.17	2,815	8,602	150,633	175,696	150,633	175,696	425,520	227,138	652,658
BIOMEDICAL WASTE SERVICES (364)	4.80	2,688	2,914	77,908	90,870	77,908	90,870	322,153	15,403	337,556
TANNING FACILITY SERVICES (369)	0.28	53	132	4,625	5,394	4,625	5,394	15,500	4,538	20,038
Group Total	25.62	7,213	16,163	381,746	445,261	381,746	445,260	1,110,673	543,340	1,654,013
Groundwater Contamination										
STORAGE TANK COMPLIANCE SERVICES (355)	0.00	0	0	0	0	0	0	0	0	0
SUPER ACT SERVICES (356)	0.31	15	115	5,040	5,878	5,040	5,877	0	21,835	21,835
Group Total	0.31	15	115	5,040	5,878	5,040	5,877	0	21,835	21,835
Community Hygiene										
COMMUNITY ENVIR. HEALTH (345)	0.50	0	389	7,448	8,687	7,448	8,686	0	32,269	32,269
INJURY PREVENTION (346)	0.00	0	0	0	0	0	0	0	0	0
LEAD MONITORING SERVICES (350)	0.00	0	0	0	0	0	0	0	0	0
PUBLIC SEWAGE (362)	0.00	0	0	0	0	0	0	0	0	0
SOLID WASTE DISPOSAL SERVICE (363)	0.00	0	0	0	0	0	0	0	0	0
SANITARY NUISANCE (365)	0.69	518	307	10,853	12,659	10,853	12,658	0	47,023	47,023
RABIES SURVEILLANCE (366)	1.25	57	2,094	17,467	20,374	17,467	20,374	0	75,682	75,682
ARBORVIRUS SURVEIL. (367)	0.00	0	0	0	0	0	0	0	0	0
RODENT/ARTHROPOD CONTROL (368)	0.19	0	25	2,253	2,628	2,253	2,628	0	9,762	9,762
WATER POLLUTION (370)	0.00	0	0	0	0	0	0	0	0	0
INDOOR AIR (371)	0.11	0	66	1,610	1,878	1,610	1,877	0	6,975	6,975
RADIOLOGICAL HEALTH (372)	0.19	118	133	2,796	3,262	2,796	3,262	12,000	116	12,116
TOXIC SUBSTANCES (373)	0.00	0	0	0	0	0	0	0	0	0
Group Total	2.93	693	3,014	42,427	49,488	42,427	49,485	12,000	171,827	183,827
ENVIRONMENTAL HEALTH SUBTOTAL	52.34	13,279	48,072	774,455	903,308	774,455	903,303	2,115,532	1,239,989	3,355,521
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	28,816	33,611	28,816	33,611	124,854	0	124,854
MEDICAID BUYBACK (611)	0.00	0	0	5,770	6,730	5,770	6,730	25,000	0	25,000
NON-OPERATIONAL COSTS SUBTOTAL	0.00	0	0	34,586	40,341	34,586	40,341	149,854	0	149,854
TOTAL CONTRACT	498.78	174,633	1,152,751	8,309,693	9,692,241	8,309,693	9,692,234	21,519,009	14,484,852	36,003,861

ORANGE COUNTY HEALTH DEPARTMENT

CIVIL RIGHTS CERTIFICATE

The applicant provides this assurance in consideration of and for the purpose of obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance to programs or activities receiving or benefiting from federal financial assistance. The provider 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.

The applicant assures that it will comply with:

- Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C., 2000 Et seq., which prohibits discrimination on the basis of race, color or national origin in programs and activities receiving or benefiting from federal financial assistance.
- Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of handicap in programs and activities receiving or benefiting from federal financial assistance.
- Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits
 discrimination on the basis of sex in education programs and activities receiving or benefiting from
 federal financial assistance.
- 4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
- 5. 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.
- 6. All regulations, guidelines and standards lawfully adopted under the above statutes. The applicant agrees that compliance with this assurance constitutes a condition of continued receipt of or benefit from federal financial assistance, and that it is binding upon the applicant, its successors, transferees, and assignees for the period during which such assistance is provided. The applicant further assures that all contracts, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the applicant understands that the grantor may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

Attachment IV

Fiscal Year - 2018 - 2019

Orange County Health Department

Facilities Utilized by the County Health Department

Complete Location	Facility Description	Lease/	Type of	Complete	SQ	Employee
(Street Address, City, Zip)	And Offical Building	Agreement	Agreement	Legal Name	Feet	Count
	Name (if applicable)	Number	(Private Lease thru	of Owner]	(FTE/OPS/
	(Admin, Clinic, Envn Hith,		State or County, other -			Contract)
	etc.)		please define)			
6101 Lake Ellenor Drive	Administration Center and			State of Florida	(10,750sf	
Orlando, Florida 32809	Southside Health Center	N/A	State Owned	Environmental Protection	PCAN)	144
1111 N Rock Springs Road				Board of County		
Apopka, Florida 32712	Apopka Health Center	N/A	County Facility	Commission	4,600	14
832 West Central Blvd Orlando,	Central Health Center-			Board of County		
Florida 32805	Building 1	N/A	County Facility	Commission	46,500	143
807 West Church Street	Central Health Center -			Board of County		
Orlando, Florida 32805	Building 2	N/A	County Facility	Commission	3,200	16
901 West Church Street	Central Health Center -			Board of County		
Orlando, Florida 32805	Building 3	N/A	County Facility	Commission	6,800	23
12050 East Colonial Drive				Board of County		
Orlando, FL 32826	Eastside Health Center	N/A	County Facility	Commission	5,750	17
1001 Executive Center Drive S-		Enterprise	Private SubLease thru	Board of County		<u> </u>
200 Orlando, Florida 32826	Executive Center - EH	Building-FDOH, OC	County	Commission	7,793	54
5449 S Semoran Blvd S-19B				Board of County		
Orlando, Florida 32822	Hoffner Dental Clinic	N/A	County Facility	Commission	1,600	5
5449 S Semoran Blvd S-18B			Private SubLease thru			
Orlando, Florida 32822	Hoffner Family Health -WIC	Lease File #2038	County	Hoffner Center, LLC	3,398	9
5730 Lake Underhill Road	Lake Underhill Family Health			Board of County		
Orlando, Florida 32806	Center - WIC	N/A	County Facility	Commission	6,050	8
5151 Raleigh Street Orlando,				Board of County		
Florida 32811	Lila Mitchell Health Center	N/A	County Facility	Commission	6,400	10
8026 Sunport Drive, S-307-311	Sunport - Prepardness Office		Private SubLease thru	Orlando Sunport		
Orlando, Florida 32809	and Warehouse Space	Lease File#2064	County	Flexxspace, LTD	152,258	5
61218 West Colonial Drive			Private SubLease thru	Westside Plaza		
Orlando, Florida 32818	Westside Plaza - WIC	Lease File #2072	County	Associates, LP	4,467	8
13275 West Colonial Drive		-	Private Sublease thru	Community Health		
Winter Garden, Florida 34787	Community Health Center	640:0388	DMS	Center, INC	2,197	7
475 West Story Road Ocoee,				Board of County		
	Ocoee Health Center	N/A	County Facility	Commission	4,600	55

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 ORANGE COUNTY HEALTH DEPARTMENT SPECIAL PROJECTS SAVINGS PLAN

CASH RESERVED OR ANTICIPATED TO BE RESERVED FOR PROJECTS

CONTRACT YEAR	STATE		COUNTY	_		TOTAL.
2017-2018*	\$	0	\$	0	\$	0
2018-2019**	\$	0	\$	0	\$. 0
2019-2020***	\$	0,	\$	0	\$	
2020-2021***	\$	0	\$	0	\$. 0
PROJECT TOTAL	\$	0	\$	0	\$	0
	SPECIAL PROJECTS	CONSTRU	JCTION/RENOVATION PL	_AN		
					•	
PROJECT NUMBER:						
PROJECT NAME:						
LOCATION/ADDRESS:						
PROJECT TYPE:	NEW BUILDING		ROOFING			
•	RENOVATION	<u></u>	PLANNING STUDY			
	NEW ADDITION		OTHER	_		
SQUARE FOOTAGE:		0				
PROJECT SUMMARY: Desc	cribe scope of work in reasor	nable deta	íl.		•	
			•			
	•					
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 9/30/18

^{**} Cash to be transferred to FCO account.

^{***} Cash anticipated for future contract years.