

**DIVISION OF PUBLIC HEALTH  
DPH CONTRACT 30498  
AMENDMENT 5**

The Department of Health Services, on behalf of the Division of Public Health and Barron County Health and Human Services Department agree to amend their original agreement for the program titled Chronic Disease (155790) and SNAP ED (154661) as follows:

REVISION: SECTION 5. SERVICES

Additional projects to be completed as detailed in attached Exhibit(s).

Adjustment will be made to the Community Aids Reporting System (CARS) based on the information in the table below.

Agency #	Agency Type	Profile #	Current Contract Level	Contract Change Amount	New Contract Level	Contract Period
3	730	155790	\$0	\$20000	\$20000	7/1/16- 6/30/17
3	730	154661	\$0	\$10710	\$10710	10/1/16- 9/30/17

All other terms and conditions of the original agreement remain unchanged.

\_\_\_\_\_  
GRANTEE's Authorized Representative  
Name:  
Title:

\_\_\_\_\_  
Date

\_\_\_\_\_  
GRANTOR's Authorized Representative  
Chuck J. Warzecha  
Administrator / Deputy Administrator, Division of Public Health  
Department of Health Services

\_\_\_\_\_  
Date

Department of Health Services  
Chronic Disease Prevention Program  
Grant/Contract Deliverables and Expectations  
Exhibit 1

**Name of Organization: Thrive Barron County/Barron County Dept. of Health & Human Services**

Contacts	Organization Contact		Contract Administrator	Program Contact
	Name	Laura Sauve, RN	Mary Pesik	Pam Geis
	Email	Laura.Sauve@co.barron.wi.us	Mary.Pesik@wisconsin.gov	Geis.Pamela@gmail.com
	Phone	(715) 537-6109	(608) 267-3694	(262) 573-3983

**Background**

The Wisconsin Department of Health Services was awarded a 5-year cooperative agreement from the Centers for Disease Control and Prevention (CDC). This grant supports state health department efforts to promote health and prevent and control chronic diseases and their risk factors. The funding supports the implementation of evidence and practice-based interventions to improve nutrition and physical activity, to reduce obesity, prevent and control diabetes, and heart disease and stroke with a focus on high blood pressure. Specific strategies will be implemented across and within three areas (or domains): environmental approaches that promote health; health system interventions; and, community-clinical linkages. Funded states must implement interventions to reach large segments of the population in the state (e.g., through school districts, early care and education (ECEs), worksites, and state and local governmental agencies), in partnership with a variety of organizations and inclusive of high-risk populations, such as minorities, LGBT and people with disabilities.

The long-term outcomes of this program are:

- Improved prevention and control of hypertension.
- Improved prevention and control of diabetes.
- Improved prevention and control of overweight and obesity.

The short-term outcomes RELATED TO THIS CONTRACT are:

- [4.2.01] Proportion of health care systems with policies or practices to refer persons with prediabetes or at high risk for type 2 diabetes to a CDC-recognized lifestyle change program
- [4.2.02] Proportion of participants in CDC-recognized lifestyle change programs who were referred by a health care provider
- [4.2.04] Number of persons with prediabetes or at high risk for type 2 diabetes who enroll in a CDC-recognized lifestyle change program

**Scope of Work Summary**

This contract supports the implementation and evaluation of a comprehensive, county-wide referral system to refer persons with prediabetes or at high risk for type 2 diabetes to a National Diabetes Prevention Program (NDPP). Referral system will include integration into EHR and cross organization departments/divisions. Thrive Barron County is a CDC-recognized lifestyle change program provider working to increase use of the lifestyle intervention program in community settings for the primary prevention of type 2 diabetes. Thrive Barron County is a coalition of community health partners who work to engage community members and organizations to focus resources and develop and strengthen partnerships to establish sustainable, safe and healthy communities. Thrive Barron County members include Cumberland Healthcare, Lakeview Medical Center, Marshfield Clinic, Mayo Clinic Health System, Barron County Aging and Disability Resource Center, and Barron County Department of Health & Human Services.

**Period of Performance: June 30, 2016 - June 29, 2017**

<b>Deliverables and Milestones</b> <i>(key activities that show progress toward the deliverable)</i>	<b>Timeline</b>
<p>Increase referrals to, use of, and/or reimbursement for CDC recognized lifestyle change programs for the prevention of type 2 diabetes (National Diabetes Prevention Program).</p> <ul style="list-style-type: none"> <li>• Develop action plan that includes building referrals into EHR and education of providers using tools provided in AMA-CDC Provider Referral Toolkit as guide to assist in patient referral process: <a href="http://www.cdc.gov/diabetes/prevention/pdf/stat_toolkit.pdf">http://www.cdc.gov/diabetes/prevention/pdf/stat_toolkit.pdf</a>.</li> <li>• Use waiting room triggers from AMA-CDC Provider Referral Toolkit as promotional tools to assist in identifying program participants (pages 13-15): <a href="http://www.cdc.gov/diabetes/prevention/pdf/stat_toolkit.pdf">http://www.cdc.gov/diabetes/prevention/pdf/stat_toolkit.pdf</a>.</li> <li>• Work with Cumberland Healthcare, Lakeview Medical Center, and Mayo Clinic Health System to begin implementation of action plan</li> <li>• Evaluate referral system and implement quick PDSA cycles for improvement</li> <li>• Provide report outlining successes/barriers to success; recommended modifications to referral system</li> </ul>	Q1-Q4

<b>Budget Category</b>	<b>Budget Amount</b>
Salary	0
Fringe	0
Travel	0
Supplies (office supplies, postage, copying, etc. related to contract)	0
Other	
<ul style="list-style-type: none"> <li>• Staff time and material costs associated with project planning/implementation meetings: \$200/mtg x 16 meetings.</li> </ul>	3,182
<ul style="list-style-type: none"> <li>• Mini-grants to health systems to offset cost of staff and materials related to planning and eventual implementation of EHR-based referral system for community programs: 3 health systems x \$5,000.</li> </ul>	15,000
Indirect @ 10%	1,818
<b>Total Costs</b>	<b>\$20,000</b>

<b>Reporting Requirements</b>	<b>Due Date</b>
<p>Progress Monitoring</p> <ul style="list-style-type: none"> <li>• Contractor will provide detailed work plan/budget.</li> <li>• Contractor will submit 6-month and year-end summaries of project highlights and progress.</li> <li>• Program Contact will conduct monthly calls with Organization Contact to review contract progress.</li> <li>• Contract Administer will conduct two calls with Organization Contact to review successes/barriers/opportunities.</li> </ul>	<p>Aug 30, 2016 Jan 2017 / Jul 2017  Monthly  Nov 2016 / May 2017</p>
<p>Cost and Reimbursement System (CARS) Report – submit electronically <a href="http://www.dhs.wisconsin.gov/bfs/CARS">http://www.dhs.wisconsin.gov/bfs/CARS</a></p>	Monthly; Final due within 60 days of contract end
In-Kind or Cost Share from non-Federal sources	Jan 2017 / Jul 2017
Reach (e.g., number of health systems, sites, participants)	Not Applicable
Evaluation Data	Not Applicable

Changes to the budget, scope of work or deliverables should be discussed with contract administrator prior to making changes	As needed
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<b>Recommended Actions to Support Overall Project</b>	
Adopt and follow meeting and gathering guidelines related to healthy food, support of breastfeeding and physical activity (Program will develop)	
Utilize the Culturally and Linguistically Appropriate Services (CLAS) Standards	
Link to CLAS <a href="http://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&amp;lvlid=53">http://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&amp;lvlid=53</a>	

<b>Allowable Costs and Activities</b>	
<i>Grant recipients will be required to comply with the Department of Health Services Allowable Cost Policy Manual: <a href="https://www.dhs.wisconsin.gov/business/allow-cost-manual.htm">https://www.dhs.wisconsin.gov/business/allow-cost-manual.htm</a></i>	
Staff time to coordinate and implement the project	
Meeting expenses related to the project (meeting room, AV equipment, travel, speakers, etc.)	
Public health evaluation	
Office supplies, postage, copying, etc. related to the project	
Consultant and contract services needed to implement the project	

<b>Unallowable Costs and Activities</b>	
Direct or indirect lobbying activities – see attached AR-12 for specific details	
Clinical care such as health screening, patient care, personal health services, medications, patient rehabilitation and other costs associated with treatment and direct care	
Costs or activities not directly related to the overall project description and scope of work	
Research	
Construction	
Capital expenditures and capital equipment. Capital equipment costs are defined as all costs associated with the acquisition of assets having a value in excess of \$5,000, and a useful life in excess of one year.	
Projects outside of Wisconsin	