

**DEPARTMENT OF STATE HEALTH SERVICES  
CONTRACT NO. HHS000761700001  
AMENDMENT NO. 1**

The Department of State Health Services (DSHS) and **The University of Texas at Austin** (Performing Agency), collectively “Parties” to that certain agreement for Electronic Health Records (HER) project, denominated as DSHS Contract No. HHS000761700001 (the “Contract”), now want to amend the Contract.

Whereas, the Parties want to amend Section III of the Contract, Contract Period, to align with the dates of the Preventative Health and Health Services Block Grant;

Whereas, DSHS has chosen to exercise its option to renew the Contract for an additional 13-month term;

Whereas, the Parties want to add funds to the Contract Budget for authorized services performed during the new Contract term; and

Whereas, the Parties want to modify the Statement of Work in support of the authorized services provided under the new Contract term.

Therefore, the Parties agree as follows:

1. Section III of the Contract, Contract Period and Renewal, is hereby amended to read as follows:

The Contract is effective September 1, 2020, and terminates on August 31, 2021, unless renewed, extended, or terminated pursuant to the terms and conditions of the Contract. System Agency may renew this Contract for one additional term to align with the grant term dates and for three additional 12-month periods thereafter if funds are available. The Parties may extend this Contract subject to mutually agreeable terms and conditions.

2. The Contract is hereby renewed (the “First Renewal Term”). The First Renewal Term shall begin on September 1, 2021 and terminates on September 30, 2022, unless renewed, extended or terminated sooner.
3. Section V of the Contract, **Contract Amount and Payment for Services**, is amended to add **\$280,000.00** to the Contract for authorized services provided during the First Renewal Term, with a total not-to-exceed of \$560,000.00.
4. Performing Agency may not begin Work during the First Renewal Term or incur any expenses prior to the date on the System Agency’s Notice to Proceed (NTP). This NTP may include an Amendment or Ratified Budget which will be incorporated into this Contract by a subsequent Amendment, if Amended. Any Work performed prior to that date on the NTP shall be at the Performing Agency’s sole risk.

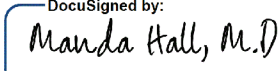
5. Attachment A of the Contract, Statement of Work, is hereby amended and restated in its entirety with Attachment A-1, Statement of Work.
6. Attachment B of the Contract, Budget, is hereby amended and restated to reflect the First Renewal Term's allocation of additional funds within **Attachment B-1**, First Renewal Term **Budget**.
7. This Amendment shall be effective as of September 1, 2021.
8. Except as modified by this Amendment, all terms and conditions of the Contract shall remain in effect.
9. Any further revision to the Contract shall be by written agreement of the Parties.

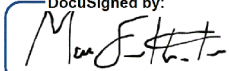
*Signature Page follows*

**SIGNATURE PAGE  
AMENDMENT No. 1  
DSHS CONTRACT NO. HHS000761700001**

**DEPARTMENT OF STATE HEALTH SERVICES**

**THE UNIVERSITY OF TEXAS AT AUSTIN**

By:  DocuSigned by:  
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By:  DocuSigned by:  
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Printed Name: Manda Hall, M.D.

Printed Name: Mark Featherston

Title: Associate Commissioner, Community Health Improvement Assistant Director, OSP

Date of Signature: May 7, 2021

Date of Signature: May 7, 2021

**THE FOLLOWING DOCUMENTS ARE ATTACHED TO THIS AMENDMENT AND INCORPORATED INTO THE CONTRACT:**

- ATTACHMENT A-1 – STATEMENT OF WORK**
- ATTACHMENT B-1 – FIRST RENEWAL TERM BUDGET**

## **ATTACHMENT A-1 STATEMENT OF WORK**

### **I. PURPOSE**

The Texas Department of State Health Services (DSHS) will contract to continue and expand the priority activities in Community and Clinical Preventive Services' Electronic Health Records (EHR) project. These evidence-based strategies aim to reduce the impact of tobacco and associated chronic diseases on the State of Texas and on individuals, families, and communities. The EHR project aims to enhance systems to improve tobacco use screening, counseling, and Quitline referral in the clinical setting as well as efforts to enhance community-clinical linkages by training Community Health Workers (CHWs) and health education staff on tobacco cessation and Quitline referral. Ask Advise Refer options are encouraged for lay health workers and healthcare systems without an EHR system or other barriers to system enhancement. The following referral types are considered Ask Advise Refer options: fax, web, and mobile app (Texas Quitline for healthcare providers, Help to Quit for Community Health Workers and health education staff).

Grantee will provide DSHS staff with monthly project status reports, via face-to-face meetings, on the Performance Measures of this Contract unless otherwise agreed to in writing by DSHS.

DSHS reserves the right, where allowed by legal authority, to redirect funds in the event of financial shortfalls. DSHS will monitor Grantee's expenditures on a quarterly basis. If expenditures are below what is projected in Grantee's total Contract amount, Grantee's budget may be subject to a decrease for the remainder of the Contract term. Vacant positions existing after ninety (90) days may result in a decrease in funds.

### **II. PERFORMANCE MEASURES**

System Agency will monitor Performing Agency's performance of the requirements in Attachment A and compliance with the Contract's terms and conditions.

Grantee will:

A. Healthcare System Integration: Continue to identify and engage healthcare systems to implement practice changes for tobacco screening, counseling, and referral, targeting areas to reflect highest tobacco burden and disparities. Healthcare system integration is through the eTobacco Protocol (eTP) or other systematic referral processes (use of mobile app, coordinated fax process).

1. A minimum of ten (10) new healthcare systems will be outreached to discuss feasibility of integrating the eTP or other referral system per fiscal year (ten by September 30, 2022). Outreach is defined as a conference call or face-to-face meeting held by the Grantee with leadership from the interested healthcare system; and
2. A minimum of five (5) healthcare systems will integrate the eTP into their EHR system per fiscal year (five by September 30, 2022). This will be based upon the readiness and capacity of the healthcare system. Integrated is defined as those healthcare systems with

a live eTP and providers trained. Healthcare systems undergoing negotiation (defined as approval by their leadership to proceed with IT using specs by eTP provider) and in testing process (defined as those who have received a testing file and are in active testing phase with their EHR vendor and Quitline provider) will also be counted.

- B. Community-based Training: Work with Texas DSHS Chronic Disease Branch and other community partners to provide certified and non-certified trainings for health educators, CHWs, local health department, and others. Provide materials to promote and encourage use of resources for the community-based referrals to the Texas Quitline to increase referrals, targeting areas to reflect highest tobacco burden in order to address disparities.
1. Provide a minimum of three (3) trainings per fiscal year by face-to-face event, webinar, or train-the-trainer resources supplied to local organizations and/or training events for city/county health departments, CHW institutes, or DSHS Regional Coordinators.
  2. Collaborate with other individuals who provide CHW training to promote the DSHS Certified Training Programs for Community Health Workers.
- C. Healthcare Provider Training: Continue to work with healthcare systems to promote, provide materials, and encourage use of eTP and Ask Advise Refer options, targeting areas that reflect highest tobacco burden and/or disparities, where possible.
1. A minimum of five (5) healthcare systems per fiscal year will receive training materials on motivational interviewing techniques and use of the eTP or other Ask Advise Refer tool options (whichever is applicable to their healthcare system). Grantee will keep track of healthcare systems trained in the electronic Performance Management and Tracking System (PMATS).
  2. Continue to work with previously recruited and engaged healthcare providers on maintaining the eTP, and to seek informal feedback that can advise UT on the barriers and opportunities for the following Fiscal Year (FY) of eTP and Ask Advise Refer options.
- D. Technical Assistance: Continue to provide technical assistance to healthcare systems, Promotora/CHWs and health education staff, and others as needed to support their tobacco cessation efforts.
1. Monitor new and existing healthcare systems with successful eTP integration and/or Ask Advise Refer options to provide technical assistance as requested.
  2. Provide technical assistance, as requested, to:
    - a) Healthcare providers;
    - b) CHW/Community Health Educator trainers and DSHS staff; and
    - c) DSHS regional tobacco staff and/or Tobacco Prevention Community Coalition representatives.
- E. Develop and maintain/update outreach, education and promotional resources to help providers and health advocates to encourage patients to use the Texas Quitline for tobacco cessation support.
1. Videos: Maintain/update three (3) existing videos as needed.

2. **Materials:** Maintain and update outreach tools and materials to promote the tobacco cessation resources and educate patients on the resources, to include costs for translating patient education and awareness materials into Spanish.
3. Support existing healthcare system connections by tailoring outreach and promotional materials.

**F. Reports and Evaluation:**

1. Develop and submit an annual Success Story with two (2) photographs and two (2) photograph release forms to DSHS. A Success Story Draft must be reviewed and approved by DSHS prior to the final version submission date.
2. Develop and submit a Final Evaluation Report for each fiscal year, following the template provided by DSHS. A Draft Evaluation Report must be reviewed and approved by DSHS prior to the final version submission date.
3. Participate in monthly conference calls or face-to-face meetings (e.g., monthly project status reports) with DSHS to be conducted on or before the 15th of each month of the Contract term, unless otherwise agreed to in writing by DSHS. During the meetings, Grantee will discuss the following: 1) implementation status; 2) barriers and methods to address those barriers; 3) opportunities to enhance the activities; 4) lessons learned; and 5) next steps. Other meetings or calls may be added, as appropriate, with Grantee and DSHS.
4. Participate in conference calls with Quitline provider as needed to provide updates and relay technical concerns as appropriate.
5. Submit quarterly Progress Reports to DSHS via PMATS. Progress report due dates are as follows:

Progress Report #	Period Covered	Due Date
FY22 Quarter 1	09/01/21 – 12/31/21	01/15/22
FY22 Quarter 2	01/01/22 – 03/31/22	04/15/22
FY22 Quarter 3	04/01/22 – 06/30/22	07/15/22
FY22 Quarter 4	07/01/22 – 09/30/22	10/15/22

**G. PMATS should be used to submit documentation and other information requested by DSHS on Numbers 1-5 above, including, but not limited to:**

1. Clinic site list for all Healthcare System Integration records considered undergoing negotiation, in process, and integrated. Clinic site list should include name and address for clinics with access to the healthcare system’s eTP and/or Ask Advise Refer options only; and
2. Roster for all training records. Roster should clearly identify participant name, provider type, and certification number (if applicable). Where Grantee is not the host, the Grantee should request the roster during the planning with host. If no roster is obtained, a justification must be entered in the training record.

**III. INVOICE AND PAYMENT**

- A.** Grantee will request payments using the State of Texas Purchase Voucher (Form B-13) at <http://www.dshs.texas.gov/grants/forms/b13form.doc>. Voucher and any supporting documentation will be mailed or submitted by fax or electronic mail to the address/number below.

Department of State Health Services  
Claims Processing Unit, MC 1940  
1100 West 49<sup>th</sup> Street  
P.O. Box 149347  
Austin, TX 78714-9347  
FAX: (512) 458-7442  
EMAIL: [invoices@dshs.texas.gov](mailto:invoices@dshs.texas.gov) and [cmsinvoice@dshs.texas.gov](mailto:cmsinvoice@dshs.texas.gov)

- B.** Grantee will be paid on a cost reimbursement basis subject to Texas Government Code section 771.008 and in accordance with Attachment B-1, First Renewal Term Budget.

**ATTACHMENT B-1  
FIRST RENEWAL TERM BUDGET**

Categorical Budget: September 1, 2021 – September 30, 2022

PERSONNEL	\$113,849.00
FRINGE BENEFITS	\$34,885.00
TRAVEL	\$20,000.00
EQUIPMENT	\$0.00
SUPPLIES	\$14,743.00
CONTRACTUAL	\$60,000.00
OTHER	\$0.00
TOTAL DIRECT CHARGES	\$243,477.00
INDIRECT CHARGES	\$36,523.00
TOTAL	\$280,000.00
Match	\$0.00
<b>Total Budget</b>	<b>\$280,000.00</b>