



THE STATE
of **ALASKA**
CONFIDENCE IN THE FUTURE

**Department of
Health and Social Services**

FINANCE AND MANAGEMENT SERVICES
Juneau Office

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Healthy & Equitable Communities

**Memorandum of Agreement (MOA), Between
State of Alaska – Department of Health and Social Services
Division of Public Health (DPH)**

- and -

City of Valdez

MOA # C0622-584-E

I. PURPOSE AND SCOPE

The State of Alaska, Dept of Health and Social Services, Division of Public Health will provide funding to Alaskan local governments in support of creating and sustaining healthy and equitable communities around the state.

Funding will support the following activities and strategies to promote and build healthy & equitable communities around the state. All funded activities must have an emphasis on high risk, underserved population groups.

- Ensure a fair and adequate baseline of care is established for populations at higher risk that are underserved and who are disproportionately impacted by COVID-19 by expanding existing or developing new mitigation and prevention resources and services;
- Increase/improve data collection and reporting for populations disproportionately affected by COVID-19 to guide current and future pandemic response;
- Build, leverage or expand infrastructure support for COVID-19 or future pandemic prevention and control among populations that are at higher risk or underserved;
- Mobilize partners to build and promote healthy and equitable communities, improving everyone's opportunities for living a healthy life, particularly those who are disproportionately impacted by COVID-19;
- Improve access to COVID-19 vaccine, as well as other necessary vaccines, for individuals who are higher risk or underserved.

II. THE STATE OF ALASKA DIVISION OF PUBLIC HEALTH (DPH) AGREES TO:

Provide support to the community for COVID-19 response and mitigation activities. The Healthy & Equitable Communities Project Team is available to consult and provide technical assistance to government entities for health equity and homeless support funds and to pre-approve pass-through recipients of award funding. The team will also ensure that approved activities meet the funding requirements.

DPH agrees to provide a total of \$27,050.85 in funds in accordance with the terms of this agreement.

Of this amount, \$23,522.48 must be spent according to the attached application.

An additional \$3,528.37 is provided to support activities that will decrease health inequity for homeless populations. Proposed activities to be funded by this money must be submitted for approval by the state project director, prior to beginning the activity. The proposed activity must be approved in writing.

III. CITY OF VALDEZ AGREES TO:

Conduct the services as described in the attached application and proposal response (both follow the last page of this MOA).

Submit, in writing, a description of the proposed activities for the healthy equity for homeless populations funds (\$3,528.37), to the Project Director. Approval of the proposed activities must be received, in writing, prior to beginning the activity.

Invoicing

The recipient will submit quarterly invoices detailing services performed. Quarterly invoices should be supported with completed reporting templates and any applicable backup documentation such as receipts, payroll information, sub award agreements, etc. Invoices are due January 15, April 15, July 15, and October 15 for each quarter.

The invoice must:

- Reference the recipient's name, address, and phone number
- Reference the contract number: C0622-584-E
- Include an invoices number
- Reference the Alaska Division of Public Health – Healthy & Equitable Communities MOA

Send invoices to: hss.publichealth@alaska.gov
(reference 'C0622-584-E MOA Reimbursement Request' in the subject line)

Failure to include the required information on invoices may cause an unavoidable delay to the payment process. The State will pay all invoices within thirty (30) days of invoice approval by the project director. The recipient shall submit final invoices no later than 30 days after the MOA expires.

IV. JOINT RESPONSIBILITIES:

Should there be a conflict amongst the documents, the following order of precedence shall apply: first, this agreement; second, the application; third, the proposal.

Both parties agree to communicate timely and effectively as needed to support the goals of this agreement. Points of contact for both parties are as follows:

State of Alaska – DPH:

Primary Points of Contact: Maria Caruso, Project Director
Maria.caruso@alaska.gov
907-310-6092

Send invoices to: hss.publichealth@alaska.gov
(reference C0622-584-E MOA Reimbursement Request in the subject line)

City of Valdez:

Primary Point of Contact: Mark Detter
mdetter@valdezak.gov
907-834-3406


Finance Point of Contact: Brian Carlson, Finance Director
bcarlson@valdezak.gov
907-834-3475 ext 6

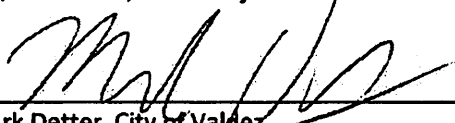
V. PERIOD OF AGREEMENT AND TERMINATION:

This agreement will be in effect from the date of execution through May 31, 2023. The services may extend beyond that date by mutual agreement of both parties. Any extension provided will be for time only, no additional funds will be offered.


VI. SIGNATURES

By signature of the below, both parties agree to the terms of this MOA.

By:  Date: 2/1/22
Maria Caruso, DHSS Project Director

By:  Date: 1/25/22
Mark Detter, City of Valdez

By: _____ Date: 02/02/2022
Heidi Hedberg, DPH Director

By:  Date: 2/8/2022
Jason Grove, DHSS Procurement Manager



THE STATE
of **ALASKA**
GOVERNOR MIKE DUNLEAVY

Department of
Health and Social Services
DIVISION OF PUBLIC HEALTH
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Healthy & Equitable Communities Memorandum of Agreement Information

PURPOSE:

The State of Alaska, Department of Health and Social Services, Division of Public Health will provide funding to Alaskan local governments in support of creating and sustaining healthy and equitable communities around the state.

Funding will be available through June 30, 2024 to support the following activities and strategies to promote and build healthy and equitable communities around the state. All funded activities must have an emphasis on high risk, underserved population groups.

- Ensure a fair and adequate baseline of care is established for populations at higher risk that are underserved and who are disproportionately impacted by COVID-19 by expanding existing or developing new mitigation and prevention resources and services;
- Increase/improve data collection and reporting for populations disproportionately affected by COVID-19 to guide current and future pandemic response;
- Build, leverage or expand infrastructure support for COVID-19 or future pandemic prevention and control among populations that are at higher risk or underserved;
- Mobilize partners to build and promote healthy and equitable communities, improving everyone's opportunities for living a healthy life, particularly those who are disproportionately impacted by COVID-19;
- Improve access to COVID-19 vaccine, as well as other necessary vaccines, for individuals who are higher risk or underserved.

SCOPE OF FUNDING:

Strategies that are implemented should aim to build infrastructures that both improve health outcomes for higher risk underserved Alaskans in the current COVID-19 pandemic and set the foundation for future responses. This application mentions several eligible activities, but communities are not limited in scope to these examples. There are several resources available for communities to assist them in determining what types of activities may be proposed. The Alaska Health Equity Index utilizes data from the US Census Bureau and the US Centers for Disease Control and Prevention's Social Vulnerability Index and is an excellent reference to assist communities in identifying target populations* and areas of need. The Healthy Alaskans team has identified priority health topics for the Healthy Alaskans 2030 plan including strategies and actionable objectives within each strategy. Both resources highlight the needs of Alaskans, and communities are encouraged to develop plans that incorporate factors from either of these resources.

*Target populations can include but are not limited to:

- Low income or homeless individuals
- Individuals/families/communities with limited access to technology/internet
- Individuals/families/communities who face food insecurity
- Communities with limited to no transportation access

- Individuals without access to health care
- Populations that do not speak English as their first language
- Rural communities/areas where physical services are not accessible
- Refugee/immigrant communities that face economic, cultural, or linguistic barriers to accessing health care services
- Individuals with disabilities
- Older adults
- Children
- Individuals with mental health or substance-related disorders

Funding is calculated using two factors: population size, and the Alaska Health Equity Index.

ELIGIBILITY:

Local governments are eligible to apply and may propose plans to engage one or more communities and geographic areas. The definition of communities may also include a group of people who have particular characteristic in common (e.g. share similar cultural beliefs or interests). Please work with your local tribes, borough, or municipality to ensure efforts are coordinated. DHSS allows recipients to act as pass-through entities to provide funding to other recipients, including community-based organizations serving populations who may experience health inequities. **Technical assistance will be provided throughout the funding period to assist with reporting, advancing approved projects, pre-approval of activities and invoice processing.**

If you live in an unincorporated census area or census designated place, are aware of an entity or organization that is interested in implementing this work and unsure about how to access this funding opportunity, please contact or HEcommunities@alaska.gov or maria.caruso@alaska.gov to discuss potential alternative opportunities. Designated entities must have the capacity to manage funds and implement projects within the scope of the funding. If communities chose to pursue this route for funding, alternative entities must be identified by **October 22, 2021**. The state intends to open up an alternate method of procurement for these entities, and the timeline for funding will be dependent upon the number of non-governmental entities identified across the state for this option. We will make every attempt to accommodate alternative requests. **For entities that chose to pursue this option, please be aware that the funding can take significantly longer to award through alternate procurement methods.**

REPORTING:

Reporting requirements will be due at the same time as invoices. Payment will not be issued unless necessary reporting is attached. Reporting requirements will be determined during the MOA preparation and will be dependent upon the type of activities selected. Entities are encouraged to collaborate with hospitals, schools and community organizations to improve the outcomes for their population. **See attachment of Healthy and Equitable Communities Memorandum of Agreement fund amounts.**

PERIOD OF AGREEMENT, DATES AND DEADLINES:

October 29, 2021 – June 30, 2024

Important dates:

Tuesday, October 5: 4-5pm	Pre award meeting with technical assistance (4pm)
Friday, October 8: 11-12pm	2 nd Pre award meeting with technical assistance (10am)
Friday, October 29 by 5pm	Funding Requests due to HECommunities@alaska.gov
November 2021	Award funding to Communities via signed MOA
June 31, 2024	Final receipts due to DPH, payments issued to Communities

Submit questions to: Maria.caruso@alaska.gov or HEcommunities@alaska.gov

TERMS OF PAYMENT: Funds will be reimbursed through invoicing upon approval of MOA.

PRIOR APPROVAL REQUIRED*:

- Construction projects
- Vehicles
- Furniture
- Equipment over \$25,000
- Reimbursement of pre-award costs (will only be considered back to June 1, 2021)

*If you wish to utilize funds for any of the above items, please provide a detailed description of how these items will fit into the overall goal of the project they will support and how they will be used.

FUNDS CANNOT BE USED FOR:

- Programs or services already funded by another HSS grant, contract or MOA
- Research
- Clinical care
- Publicity or propaganda

If these funds are used to administer COVID-19 testing or vaccine services recipients must:

- Establish/maintain a means to ensure that the results of all COVID testing performed by this entity/sub-recipient/pass through entity is reporting to the State of Alaska Department of Health and Social Services. All testing (all types, all results) is subject to this requirement and must be reported within 24 hours of administration
- Establish/maintain a means to ensure that the COVID-19 vaccine administration performed by this entity/sub-recipient/pass through entity is reporting to the State of Alaska Department of Health and Social Services. All vaccinations must be reported within 24 hours of administration. Please complete the application in order to develop MOA.

Submit completed application and W9 to: HEcommunities@alaska.gov and cc maria.caruso@alaska.gov.

Healthy and Equitable Communities Memorandum of Agreement Application

Primary Contact Information:

(Please make sure to include name, phone number, email and physical address for all contacts listed.)

Program Contact: Mark Detter

Phone number: 907-834-3406

Email: mdetter@valdezak.gov

Physical Address: 212 Chenega, Valdez, Alaska 99686

Finance Contact: Brian Carlson, Finance Director

Phone number: 907-834-3475 EXT 6

Email: bcarslon@valdezak.gov

Physical Address: 212 Chenga, Valdez, Alaska 99686

Other Contact that needs to sign/be listed on the Memorandum of Agreement (MOA):

Contact: Brianne Skilbred

Phone number: 907-834-3406

Email: bskilbred@valdezak.gov

Physical Address: 212 Chenega

Please list communities and partners intended to be part of this funding, either through subawards or support.

Community/Partner Name(s):

Dr. Angela Alfaro

SCOPE and AMOUNTS:

Please check activities from the menu below. In the final box, indicate the dollar amount anticipated. All activities selected must have an emphasis on high risk, underserved population groups.

Menu of Activities

1. Ensure a fair and adequate baseline of care is established for populations who are disproportionately impacted by COVID-19 by expanding existing or developing new mitigation and prevention resources and services targeted at higher risk, underserved Alaskans:
 - Expand reach of case investigation and contact tracing
 - ☒ Enhance availability of supportive services that enable individuals to successfully isolate or quarantine
 - Collaborate with community groups who can connect people at higher risk for COVID 19 with community services
 - Improve access to vaccination information and services
 - ☒ Reduce the rate of preventable hospitalizations by improving access to primary and preventative care
 - Improve/increase access to health insurance
 - ☐ Provide new or improved access to mental health services or provide education for/destigmatize existing services
 - Provide/improve access to substance use disorder treatment/tobacco cessation resources or provide education for/destigmatize existing services
 - Adopt strategies in the built environment that can mitigate the impact of COVID-19, for example establishing new pedestrian zones to minimize crowding and encourage physical activity
 - ☐ Assess and adapt health policies, for example food service guidelines, to ensure they reach higher risk underserved Alaskans
 - ☒ Other activities (Please describe in the box below)

If there is not sufficient space to provide details of activities selected and proposed budget, please attach a spreadsheet or addendum to your application.

The City of Valdez is requesting \$23,522.48 to address gaps for unskilled and skilled home healthcare in Valdez. The Valdez community needs to increase coordination with such unskilled and skilled home health care workers and the Alpha Doc Clinic and Valdez Provide Medical Center and other providers that have not been able to coordinate with the previously mentioned groups. The home healthcare providers care would benefit those who are placed in quarantine due to COVID or those recovering from COVID and other health conditions that COVID exacerbates.

Valdez does not currently have a safety net of care and many patients particularly those underserved and vulnerable populations who may not have resources to obtain these services on their own. Developing a program that involves hiring a consultant to coordinate with local groups to facilitate this services will be a great use of this proposed funding. The consultant would help Valdez coordinate with multiple groups and agencies that provide these services.

Will the program is not fully developed these funds can be used for great benefit to the Valdez community with the City act as Grant agent and working with local medical provider to coordinate services.

Total \$23,522.48