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# Exhibit A

## Local Indignant Care Needs Funding- Diabetes Prevention Program
## California Health Collaborative

The Siskiyou County Health and Human Services Agency- Public Health Division, seeks to partner with California Health Collaborative to execute the specified grant objectives. Primarily, grant activities will focus on execution of a county wide diabetes program that aligns with CDC program standards. California Health Collaborative will bill for services rendered within the scope of work, not to exceed $211,250.00.

### A. <u>Compensation:</u>

The County shall compensate Contractor for services provided as follows:

1. The contractor will bill the county based on the deliverables per cohort. The cost per cohort includes coordination, identification of needs, planning, mileage, trainings and other activities to support the grant priorities. The Contractor will conduct at least one cohort for the contract period.
2. The contractor will bill the county based on deliverables which support general program function. The costs which support program function includes coordination, data collection, required collaborative meetings, cohort planning, education and outreach, mileage, trainings and other activities to support the grant priorities.
3. The contractor will bill the county for mileage at the rate allowed under prevailing Internal Revenue Service rules and regulations as maintained by the County Auditor-Controller. The contractor will submit to the county a mileage log and google maps for all mileage billed to the county.
4. Maximum payable for Scope of Work will not exceed Two Hundred Eleven Thousand Two hundred Fifty Dollars and No/100 ($211,250.00).
5. The work shall be performed and completed to the County’s satisfaction during the period of 07/15/2022-01/31/2025; any other time spent will not be reimbursed by the County.
6. There will be no reimbursement for meals during travel.

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7. It is the Public Health Director's option to discontinue Contractor's services at any time.

**B. <u>California Health Collaborative agrees to:</u>**

1. Organize and facilitate diabetes prevention program cohorts throughout the county, in alignment with CDC program standards and curriculum.

2. Coordinate with partnering providers and community organizations to promote participation in the program, receive referrals, and increase diabetes prevention education.

3. Collect appropriate participant data, including demographics

4. Participate in collaborative meetings

5. Should the need be identified, undertake quality improvement efforts in collaboration with SCPHD to improve overall program function

6. Work with SCPHD to design a reporting document for data collection for relevant data/activities including:

    a. Number of participants

    b. Participant retention rate

    c. Participant data metrics (as outlined in the CDC curriculum)

    d. Number of referring partners

    e. Outreach events attended