

CONTRACT, LEASE, AGREEMENT CONTROL FORM

Date: 12/08/2023

Contract/Lease Control #: C97-0025-HD

Procurement#: N/A

Contract/Lease Type: AGREEMENT

Award To/Lessee: FLORIDA DEPARTMENT OF HEALTH

Owner/Lessor: OKALOOSA COUNTY

Effective Date: 10/01/2023

Expiration Date: 09/30/2024

Description of: OPERATION OF THE HEALTH DEPARTMENT

Department: BCC

Department Monitor: HOFSTAD

Monitor's Telephone #: 850-651-7105

Monitor's FAX # or E-mail: JHOFSTAD@MYOKALOOSA.COM

Closed: _____

CC: BCC RECORDS

**PROCUREMENT/CONTRACT/LEASE
INTERNAL COORDINATION SHEET**

Procurement/Contract/Lease Number: C97-0025-HD Tracking Number: 4941-23
Procurement/Contractor/Lessee Name: Dept of Health Grant Funded: YES ___ NO X
Purpose: renewal
Date/Term: 9-30-24 1. GREATER THAN \$100,000
Department #: 1550 2. GREATER THAN \$50,000
Account #: 581002 3. \$50,000 OR LESS
Amount: \$ 661,827.00
Department: HD Dept. Monitor Name: Chapman

Purchasing Review

Procurement of Contract/Lease requirements are met: [Signature] Date: 9-1-23
Purchasing Manager or designee: DeRita Mason, Erin Poole, Amber Hammonds

2CFR Compliance Review (if required)

Approved as written: NO federal [Signature] Grant Name: _____ Date: _____
Grants Coordinator: Suzanne Ulloa

Risk Management Review

Approved as written: see email attached Date: 9-1-23
Risk Manager or designee: Lydia Garcia

County Attorney Review

Approved as written: see email attached Date: 9-1-23
County Attorney: Lynn Hoshihara, Kerry Parsons or Designee

Department Funding Review

Approved as written: _____ Date: _____

IT Review (if applicable)

Approved as written: _____ Date: _____

DeRita Mason

From: Lynn Hoshihara
Sent: Friday, September 1, 2023 1:30 PM
To: DeRita Mason
Cc: 'Parsons, Kerry'; Jacqueline Matichuk; Odessa Cooper-Pool
Subject: Re: Non BCC agency 14915 was Submitted : Health Department Contract Renewal

This is approved.

Lynn M. Hoshihara
County Attorney
Okaloosa County, Florida

Please note: Due to Florida's very broad public records laws, most written communications to or from County employees regarding County business are public records, available to the public and media upon request. Therefore, this written e-mail communication, including your e-mail address, may be subject to public disclosure.

From: DeRita Mason
Sent: Friday, September 1, 2023 2:11:21 PM
To: Lynn Hoshihara
Cc: 'Parsons, Kerry'; Jacqueline Matichuk; Odessa Cooper-Pool
Subject: FW: Non BCC agency 14915 was Submitted : Health Department Contract Renewal

Good afternoon,
Please review and approve the attached.
Thank you,

DeRita Mason



DeRita Mason, CPPO, CPPB, NIGP-CPP
Purchasing Manager
Okaloosa County Purchasing Department
5479A Old Bethel Road
Crestview, Florida 32536
Office: (850) 689-5960 Ext. 6966
Cell: (850) 826-8010
dmason@myokaloosa.com

DeRita Mason

From: Odessa Cooper-Pool
Sent: Tuesday, September 5, 2023 1:21 PM
To: DeRita Mason; Lynn Hoshihara
Cc: 'Parsons, Kerry'
Subject: RE: Non BCC agency 14915 was Submitted : Health Department Contract Renewal
Attachments: Florida Department of Health Core Contract Renewal 2023-24.pdf

Good afternoon DeRita,

The renewal agreement for the Florida Department of Health, C97-0025-HD, has been reviewed and is approved by Risk Management for insurance purposes.

Thank you,

Odessa Cooper-Pool

Public Records & Contracts Specialist |Risk Management
Okaloosa County BCC
302 N. Wilson Street, Crestview, FL 32536
Office: 1-850-689-4111



"And, when you want something, all the universe conspires in helping you to achieve it."— Paulo Coelho, *The Alchemist*

Please note: Due to Florida's very broad public records laws, most written communications to or from County employees regarding County business are public records, available to the public and media upon request. Therefore, this written e-mail communication, including your e-mail address, may be subject to public disclosure.

From: DeRita Mason <dmason@myokaloosa.com>
Sent: Friday, September 1, 2023 1:11 PM
To: Lynn Hoshihara <lhoshihara@myokaloosa.com>
Cc: 'Parsons, Kerry' <KParsons@ngn-tally.com>; Jacqueline Matichuk <jmatichuk@myokaloosa.com>; Odessa Cooper-Pool <ocooperpool@myokaloosa.com>
Subject: FW: Non BCC agency 14915 was Submitted : Health Department Contract Renewal
Importance: High

Good afternoon,
Please review and approve the attached.
Thank you,

DeRita Mason

CONTRACT: C97-0025-HD
FLORIDA DEPT OF HEALTH
COUNTY HEALTH DEPT FUNDING
EXPIRES:09/30/2024

CONTRACT BETWEEN
OKALOOSA COUNTY BOARD OF COUNTY COMMISSIONERS
AND
STATE OF FLORIDA DEPARTMENT OF HEALTH
FOR OPERATION OF THE
OKALOOSA COUNTY HEALTH DEPARTMENT
CONTRACT YEAR 2023-2024

This contract is made and entered into between the State of Florida, Department of Health ("State"), and the Okaloosa County Board of County Commissioners ("County"), through their undersigned authorities, effective October 1, 2023. State and County are jointly referred to as the "parties".

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 the "promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations."

C. Okaloosa 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 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 is hereby acknowledged, the parties hereto agree as follows:

1. RECITALS. The parties mutually agree that the foregoing recitals are true and correct and incorporated herein by reference.
2. TERM. The parties mutually agree that this contract shall be effective from October 1, 2023, through September 30, 2024, or until a written contract replacing this contract is entered into between the parties, whichever is later, unless this contract is otherwise terminated according to the termination provisions outlined in paragraph 8. below.
3. SERVICES MAINTAINED BY THE CHD. The parties mutually agree that the CHD shall provide those services as outlined in Part III of Attachment II hereof, 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 that are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment that 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 that protect the health of the general public through the detection, control, and eradication of diseases that 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. FUNDING. 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 outlined 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 \$ 4,916,023 (*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 \$661,827 (*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 the 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 or decrease, the CHD will revise Attachment II and send a copy of the revised pages to the County and the State's Office of Budget and Revenue Management. If the County initiates the increase or decrease, the County shall notify the CHD in writing. The CHD will then revise Attachment II and send a copy of the revised pages to the State's 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
Okaloosa County Health Department
221 Hospital Dr. NE
Fort Walton Beach, FL 32548

5. CHD DIRECTOR or ADMINISTRATOR. Both parties agree the director or 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 State's Deputy Secretary for County Health Systems. The director or administrator shall be selected by the State with the concurrence of the County. The director or 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. ADMINISTRATIVE POLICIES AND PROCEDURES. 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 outlined in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel laws, 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 purchasing contract has been implemented for those goods or services. In such cases, the CHD director or 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 following 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 following the Generally Accepted Accounting Principles, as promulgated by the Governmental Accounting Standards Board, and the requirements of federal or state law. These records shall be maintained as

required by the State's 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 is 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:

- i.* The revenue and expenditure requirements in the Florida Accounting Information Resource System; and
- 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; and
- iii.* Financial procedures specified in the State's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda; and
- 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 Okaloosa County.

e. That any surplus or 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 or 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 or deficit funds accruing to the State and County is determined each month and at the contract year-end. Surplus funds may be applied toward the funding requirements of each party 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 that clearly illustrates the amount which has been credited to each party. 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 or administrator determines that an emergency exists wherein a time delay would endanger the public's health and the State's Deputy Secretary for County Health Systems have approved the transfer. The State's 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 certified public accountant 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, as revised, and may be in conjunction with audits performed by the County government. If audit exceptions are found, then the director or 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 five years after termination of this contract. If an audit has been initiated and audit findings have not been resolved at the end of five years, the records shall be retained until the resolution of the audit findings.

k. The CHD shall maintain the 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 State's 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 concerning client confidentiality.

l. 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.

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 right to a fair hearing to the final governing authority of the CHD. 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 Compliance and Non-Discrimination 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:

- i.* The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report; and
- 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 State's 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 are delayed due to circumstances beyond the CHD's control:

- i.* March 1, 2024, for the reporting period of October 1, 2023, through December 31, 2023; and
- ii.* June 1, 2024, for the reporting period of October 1, 2023, through March 31, 2024; and
- iii.* September 1, 2024, for the reporting period of October 1, 2023 through June 30, 2024; and
- iv.* December 1, 2024, for the reporting period of October 1, 2023 through September 30, 2024.

7. FACILITIES AND EQUIPMENT. 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 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 and the CHD is responsible for the costs of their maintenance and repair. 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. TERMINATION.

a. Termination at Will. This contract may be terminated by either party without cause upon no less than 180 calendar days' notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties.

b. Termination Because of Lack of Funds. In the event funds to finance this contract become unavailable, either party may terminate this contract upon no less than 24 hours' notice.

c. Termination for Breach. This contract may be terminated by either party for a material breach of an obligation hereunder, upon no less than 30 days' notice. Waiver of a 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. MISCELLANEOUS. The parties further agree:

a. Availability of Funds. If this contract, any renewal hereof, or any term, performance, or payment hereunder, extends beyond the CHD fiscal year beginning July 1, 2024, it is agreed that the performance and payment under this contract are contingent upon an annual appropriation by the Legislature, under section 287.0582, Florida Statutes.

b. Contract Managers. The name and addresses of the contract managers for the parties under this contract are as follows:

For the State:

For the County:

Susan Wagner
Name
Business Manager
Title
221 Hospital Dr. NE

John Hofstad
Name
County Administrator
Title
1250 N. Eglin Parkway Suite 102

Fort Walton Beach, FL 32548
Address

Shalimar, FL 32579
Address

Susan.Wagner@flhealth.gov
Email Address
(850)344-0515
Telephone

jhofstad@myokaloosa.com
Email Address
(850)651-7515
Telephone

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

c. Captions. 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.

d. Notices. Any notices provided under this contract must be delivered by certified mail, return receipt requested, in person with proof of delivery, or by email to the email address of the respective party identified in Section 9.b., above.

In WITNESS THEREOF, the parties hereto have caused this eight page contract, with its attachments as referenced, including Attachment I (two pages), Attachment II (six pages), Attachment III (one pages), Attachment IV (one pages), and Attachment V (one pages), to be executed by their undersigned officials as duly authorized effective the 1st day of October 2023.

**BOARD OF COUNTY COMMISSIONERS
FOR OKALOOSA COUNTY**

**STATE OF FLORIDA
DEPARTMENT OF HEALTH**

SIGNED BY: 

SIGNED BY: 

NAME: Robert A. "Trey" Goodwin III

NAME: Joseph A. Ladapo, M.D., Ph.D.

TITLE: Chairman


TITLE: State Surgeon General

DATE: SEP 19 2023

DATE: 11-21-23



ATTESTED TO:

SIGNED BY: For 

SIGNED BY: 

NAME: J.D Peacock, II

NAME: Elizabeth Smith, MSN, RN

TITLE: Clerk of Courts & Comptroller

TITLE: CHD Administrator

DATE: SEP 19 2023

DATE: 9/25/2023



ATTACHMENT I
OKALOOSA 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>	<u>Requirement</u>
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

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

ATTACHMENT II
OKALOOSA 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 09/30/23	0	1288597	1288597
2. Drawdown for Contract Year October 1, 2023 to September 30, 2024	0	-600047	-600047
3. Special Capital Project use for Contract Year October 1, 2023 to September 30, 2024	0	0	0
4. Balance Reserved for Contingency Fund October 1, 2023 to September 30, 2024	0	688550	688550

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

ATTACHMENT II

OKALOOSA COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

October 1, 2023 to September 30, 2024

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
1. GENERAL REVENUE - STATE					
015040 AIDS PATIENT CARE	50,000	0	50,000	0	50,000
015040 AIDS PREVENTION & SURVEILLANCE - GENERAL REVENUE	70,920	0	70,920	0	70,920
015040 CHD - TB COMMUNITY PROGRAM	52,849	0	52,849	0	52,849
015040 DENTAL SPECIAL INITIATIVE PROJECTS	6,933	0	6,933	0	6,933
015040 FAMILY PLANNING GENERAL REVENUE	251,157	0	251,157	0	251,157
015040 PRIMARY CARE PROGRAM	245,068	0	245,068	0	245,068
015040 RACIAL & ETHNIC DISPARITIES - CHD EXPENSES	52,000	0	52,000	0	52,000
015040 SCHOOL HEALTH SERVICES	177,240	0	177,240	0	177,240
015050 CHD GENERAL REVENUE NON-CATEGORICAL	1,899,443	0	1,899,443	0	1,899,443
GENERAL REVENUE TOTAL	2,805,610	0	2,805,610	0	2,805,610
2. NON GENERAL REVENUE - STATE					
015010 TOBACCO STATE AND COMMUNITY INTERVENTIONS	178,898	0	178,898	0	178,898
NON GENERAL REVENUE TOTAL	178,898	0	178,898	0	178,898
3. FEDERAL FUNDS - STATE					
007000 AIDS DRUG ASSISTANCE PROGRAM ADMIN HQ	31,075	0	31,075	0	31,075
007000 WIC BREASTFEEDING PEER COUNSELING PROG	42,411	0	42,411	0	42,411
007000 COASTAL BEACH WATER QUALITY MONITORING	9,958	0	9,958	0	9,958
007000 COMPREHENSIVE COMMUNITY CARDIO - PHBG	35,000	0	35,000	0	35,000
007000 ELC COVID ENHANCED DETECTION EXPANSION GRANT	137,385	0	137,385	0	137,385
007000 FAMILY PLANNING TITLE X - GRANT	321,809	0	321,809	0	321,809
007000 HEALTH DISPARITIES GRANT COVID-19	15,763	0	15,763	0	15,763
007000 PUBLIC HLTH INFRASTRUCTURE & WORKFORCE/CENTRAL 1	168,506	0	168,506	0	168,506
007000 IMMUNIZATION & VACCINES CHILDREN COVID 19 RESPON	2,039	0	2,039	0	2,039
007000 INFANT MORTALITY	11,242	0	11,242	0	11,242
007000 IMMUNIZATION ACTION PLAN	59,196	0	59,196	0	59,196
007000 MCH SPECIAL PRJCT UNPLANNED PREGNANCY	40,187	0	40,187	0	40,187
007000 MCH SPEC PRJ SOCIAL DETERMINANTS HLTH COMM EDU	5,100	0	5,100	0	5,100
007000 MCH SPECIAL PROJECTS DENTAL	8,117	0	8,117	0	8,117
007000 OVERDOSE DATA TO ACTION	90,626	0	90,626	0	90,626
007000 BASE COMMUNITY PREPAREDNESS CAPABILITY	97,379	0	97,379	0	97,379
007000 BASE PUB HLTH SURVEILLANCE & EPI INVESTIGATION	63,773	0	63,773	0	63,773
007000 BASE REGIONAL PREPAREDNESS CAPABILITY	199,520	0	199,520	0	199,520
007000 TB CONTROL PROJECT	5,992	0	5,992	0	5,992
007000 WIC PROGRAM ADMINISTRATION	826,541	0	826,541	0	826,541
FEDERAL FUNDS TOTAL	2,171,619	0	2,171,619	0	2,171,619
4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE					
001020 CHD STATEWIDE ENVIRONMENTAL FEES	127,667	0	127,667	0	127,667
001092 ON SITE SEWAGE DISPOSAL PERMIT FEES	185,000	0	185,000	0	185,000
001092 CHD STATEWIDE ENVIRONMENTAL FEES	1,411	0	1,411	0	1,411
001206 ON SITE SEWAGE DISPOSAL PERMIT FEES	16,000	0	16,000	0	16,000
001206 SANITATION CERTIFICATES (FOOD INSPECTION)	3,012	0	3,012	0	3,012

ATTACHMENT II

OKALOOSA COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

October 1, 2023 to September 30, 2024

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
001206 SEPTIC TANK RESEARCH SURCHARGE	2,500	0	2,500	0	2,500
001206 SEPTIC TANK VARIANCE FEES 50%	250	0	250	0	250
001206 PUBLIC SWIMMING POOL PERMIT FEES-10% HQ TRANSFER	9,282	0	9,282	0	9,282
001206 DRINKING WATER PROGRAM OPERATIONS	100	0	100	0	100
001206 TANNING FACILITIES	279	0	279	0	279
001206 ONSITE SEWAGE TRAINING CENTER	1,000	0	1,000	0	1,000
001206 MOBILE HOME & RV PARK FEES	1,450	0	1,450	0	1,450
FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL	347,951	0	347,951	0	347,951
 5. OTHER CASH CONTRIBUTIONS - STATE:					
	0	0	0	0	0
090001 DRAW DOWN FROM PUBLIC HEALTH UNIT	0	0	0	0	0
OTHER CASH CONTRIBUTION TOTAL	0	0	0	0	0
 6. MEDICAID - STATE/COUNTY:					
001057 CHD CLINIC FEES	0	167,594	167,594	0	167,594
001148 CHD CLINIC FEES	0	1,146,898	1,146,898	0	1,146,898
MEDICAID TOTAL	0	1,314,492	1,314,492	0	1,314,492
 7. ALLOCABLE REVENUE - STATE:					
	0	0	0	0	0
ALLOCABLE REVENUE TOTAL	0	0	0	0	0
 8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE					
ADAP	0	0	0	781,639	781,639
PHARMACY DRUG PROGRAM	0	0	0	19,572	19,572
WIC PROGRAM	0	0	0	2,989,578	2,989,578
BUREAU OF PUBLIC HEALTH LABORATORIES	0	0	0	23,941	23,941
IMMUNIZATIONS	0	0	0	326,037	326,037
OTHER STATE CONTRIBUTIONS TOTAL	0	0	0	4,140,762	4,140,762
 9. DIRECT LOCAL CONTRIBUTIONS - BCC/TAX DISTRICT					
008005 CHD LOCAL REVENUE & EXPENDITURES	0	661,827	661,827	0	661,827
DIRECT COUNTY CONTRIBUTIONS TOTAL	0	661,827	661,827	0	661,827
 10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY					
001073 340B PRESCRIPTION DRUG SERVICE AGREEMENT	0	1,208,593	1,208,593	0	1,208,593
001073 CHD CLINIC FEES	0	50,784	50,784	0	50,784
001077 CHD CLINIC FEES	0	61,134	61,134	0	61,134
001094 CHD LOCAL ENVIRONMENTAL FEES	0	276,812	276,812	0	276,812
001110 VITAL STATISTICS CERTIFIED RECORDS	0	295,048	295,048	0	295,048
FEES AUTHORIZED BY COUNTY TOTAL	0	1,892,371	1,892,371	0	1,892,371
 11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY					
001029 340B PRESCRIPTION DRUG SERVICE AGREEMENT	0	170,605	170,605	0	170,605
001029 CHD CLINIC FEES	0	87,727	87,727	0	87,727

ATTACHMENT II

OKALOOSA COUNTY HEALTH DEPARTMENT

Part II, Sources of Contributions to County Health Department

October 1, 2023 to September 30, 2024

	State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
001090 CHD CLINIC FEES	0	317	317	0	317
007010 RYAN WHITE TITLE III - DIRECT TO CHD	0	200,820	200,820	0	200,820
007010 RYAN WHITE TITLE III - DIRECT TO CHD	0	80,814	80,814	0	80,814
007099 CHD FEDERAL & LOCAL INDIRECT EARNINGS	0	30,705	30,705	0	30,705
010300 STATE UNDERGROUND PETROLEUM RESPONSE ACT	0	300	300	0	300
010300 MIGRANT LABOR HOUSING INSPECTION H-2A PROGRAM	0	134	134	0	134
090002 DRAW DOWN FROM PUBLIC HEALTH UNIT	0	600,047	600,047	0	600,047
OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL	0	1,171,469	1,171,469	0	1,171,469
12. ALLOCABLE REVENUE - COUNTY					
	0	0	0	0	0
COUNTY ALLOCABLE REVENUE TOTAL	0	0	0	0	0
13. BUILDINGS - COUNTY					
ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	768,890	768,890
JANITORIAL	0	0	0	76,000	76,000
UTILITIES	0	0	0	0	0
BUILDING MAINTENANCE	0	0	0	0	0
GROUNDS MAINTENANCE	0	0	0	0	0
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	844,890	844,890
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	5,504,078	5,040,159	10,544,237	4,985,652	15,529,889

ATTACHMENT II

OKALOOSA COUNTY HEALTH DEPARTMENT

Part III, Planned Staffing, Clients, Services and Expenditures By Program Service Area Within Each Level of Service

October 1, 2023 to September 30, 2024

	FTE's (0.00)	Clients Units	Services/ Visits	Quarterly Expenditure Plan				State	County	Grand Total
				1st	2nd (Whole dollars only)	3rd	4th			
A. COMMUNICABLE DISEASE CONTROL:										
IMMUNIZATION (101)	2.75	2,293	2,933	63,909	54,782	63,909	55,688	214,982	23,306	238,288
SEXUALLY TRANS. DIS. (102)	5.31	1,588	2,959	164,155	140,713	164,155	143,039	357,834	254,228	612,062
HIV/AIDS PREVENTION (03A1)	1.45	0	101	33,349	28,586	33,349	29,059	70,920	53,423	124,343
HIV/AIDS SURVEILLANCE (03A2)	0.00	0	0	0	0	0	0	0	0	0
HIV/AIDS PATIENT CARE (03A3)	11.44	242	837	552,393	473,509	552,393	481,337	50,000	2,009,632	2,059,632
ADAP (03A4)	0.65	78	118	12,671	10,862	12,671	11,041	47,245	0	47,245
TUBERCULOSIS (104)	1.42	8	233	37,761	32,368	37,761	32,903	140,793	0	140,793
COMM. DIS. SURV. (106)	6.03	0	5,496	163,744	140,361	163,744	142,680	312,087	298,442	610,529
HEPATITIS (109)	0.00	0	0	0	0	0	0	0	0	0
PREPAREDNESS AND RESPONSE (116)	7.54	0	221	208,387	178,628	208,387	181,581	776,983	0	776,983
REFUGEE HEALTH (118)	0.00	0	0	0	0	0	0	0	0	0
VITAL RECORDS (180)	1.57	7,867	19,604	33,722	28,906	33,722	29,385	0	125,735	125,735
COMMUNICABLE DISEASE SUBTOTAL	38.16	12,076	32,502	1,270,091	1,088,715	1,270,091	1,106,713	1,970,844	2,764,766	4,735,610
B. PRIMARY CARE:										
CHRONIC DISEASE PREVENTION PRO (210)	1.04	0	405	42,947	36,814	42,947	37,424	160,132	0	160,132
WIC (21W1)	12.88	5,412	35,182	277,120	237,546	277,120	241,473	1,033,259	0	1,033,259
TOBACCO USE INTERVENTION (212)	3.11	0	80	67,882	58,188	67,882	59,151	253,103	0	253,103
WIC BREASTFEEDING PEER COUNSELING (21W2)	2.02	0	5,660	20,777	17,810	20,777	18,105	77,469	0	77,469
FAMILY PLANNING (223)	12.96	4,005	6,783	292,782	250,972	292,782	255,120	727,971	363,685	1,091,656
IMPROVED PREGNANCY OUTCOME (225)	0.00	0	0	3,015	2,585	3,015	2,627	11,242	0	11,242
HEALTHY START PRENATAL (227)	0.00	0	0	0	0	0	0	0	0	0
COMPREHENSIVE CHILD HEALTH (229)	0.00	0	0	0	0	0	0	0	0	0
HEALTHY START CHILD (231)	0.00	0	0	0	0	0	0	0	0	0
SCHOOL HEALTH (234)	3.18	0	367,981	69,550	59,618	69,550	60,603	259,321	0	259,321
COMPREHENSIVE ADULT HEALTH (237)	0.01	44	51	532	456	532	465	0	1,985	1,985
COMMUNITY HEALTH DEVELOPMENT (238)	5.90	0	2,674	184,885	158,483	184,885	161,102	412,342	277,013	689,355
DENTAL HEALTH (240)	11.17	4,004	7,049	332,250	284,803	332,250	289,510	30,145	1,208,668	1,238,813
PRIMARY CARE SUBTOTAL	52.27	13,465	425,865	1,291,740	1,107,275	1,291,740	1,125,580	2,964,984	1,851,351	4,816,335
C. ENVIRONMENTAL HEALTH:										
Water and Onsite Sewage Programs										
COSTAL BEACH MONITORING (347)	0.21	288	312	4,771	4,089	4,771	4,157	17,788	0	17,788
LIMITED USE PUBLIC WATER SYSTEMS (357)	0.09	14	26	2,474	2,121	2,474	2,155	1,300	7,924	9,224
PUBLIC WATER SYSTEM (358)	0.00	0	0	0	0	0	0	0	0	0
PRIVATE WATER SYSTEM (359)	0.02	0	28	516	443	516	450	0	1,925	1,925
ONSITE SEWAGE TREATMENT & DISPOSAL (361)	3.56	957	1,877	101,257	86,797	101,257	88,233	185,000	192,544	377,544
Group Total	3.88	1,259	2,243	109,018	93,450	109,018	94,995	204,088	202,393	406,481
Facility Programs										
TATTOO FACILITY SERVICES (344)	0.01	0	0	195	167	195	171	0	728	728
FOOD HYGIENE (348)	0.89	135	520	22,677	19,439	22,677	19,761	39,749	44,805	84,554

ATTACHMENT II

OKALOOSA COUNTY HEALTH DEPARTMENT

Part III, Planned Staffing, Clients, Services and Expenditures By Program Service Area Within Each Level of Service

October 1, 2023 to September 30, 2024

	FTE's (0.00)	Clients Units	Services/ Visits	Quarterly Expenditure Plan				State	County	Grand Total
				1st	2nd	3rd	4th			
				(Whole dollars only)						
BODY PIERCING FACILITIES SERVICES (349)	0.00	0	0	0	0	0	0	0	0	0
GROUP CARE FACILITY (351)	0.48	72	220	12,439	10,663	12,439	10,840	0	46,381	46,381
MIGRANT LABOR CAMP (352)	0.02	2	18	521	447	521	454	573	1,370	1,943
HOUSING & PUB. BLDG. (353)	0.00	0	0	0	0	0	0	0	0	0
MOBILE HOME AND PARK (354)	1.13	117	546	25,519	21,875	25,519	22,237	93,531	1,619	95,150
POOLS/BATHING PLACES (360)	1.85	455	2,037	42,306	36,264	42,306	36,863	79,919	77,820	157,739
BIOMEDICAL WASTE SERVICES (364)	0.00	0	0	0	0	0	0	0	0	0
TANNING FACILITY SERVICES (369)	0.05	14	44	1,414	1,212	1,414	1,231	2,564	2,707	5,271
Group Total	4.43	795	3,385	105,071	90,067	105,071	91,557	216,336	175,430	391,766
Groundwater Contamination										
STORAGE TANK COMPLIANCE SERVICES (355)	0.00	0	0	0	0	0	0	0	0	0
SUPER ACT SERVICES (356)	0.01	0	2	336	288	336	293	0	1,253	1,253
Group Total	0.01	0	2	336	288	336	293	0	1,253	1,253
Community Hygiene										
COMMUNITY ENVIR. HEALTH (345)	0.00	0	0	0	0	0	0	0	0	0
INJURY PREVENTION (346)	0.15	0	0	4,722	4,047	4,722	4,114	8,626	8,979	17,605
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)	0.42	383	452	9,499	8,142	9,499	8,277	21,581	13,836	35,417
RABIES SURVEILLANCE (366)	1.13	52	136	22,475	19,266	22,475	19,584	61,649	22,151	83,800
ARBORVIRUS SURVEIL. (367)	0.00	0	0	0	0	0	0	0	0	0
RODENT/ARTHROPOD CONTROL (368)	0.00	0	0	0	0	0	0	0	0	0
WATER POLLUTION (370)	0.00	0	0	0	0	0	0	0	0	0
INDOOR AIR (371)	0.00	0	0	0	0	0	0	0	0	0
RADIOLOGICAL HEALTH (372)	0.00	0	0	0	0	0	0	0	0	0
TOXIC SUBSTANCES (373)	0.00	0	0	0	0	0	0	0	0	0
Group Total	1.70	435	588	36,696	31,455	36,696	31,975	91,856	44,966	136,822
ENVIRONMENTAL HEALTH SUBTOTAL	10.02	2,489	6,218	251,121	215,260	251,121	218,820	512,280	424,042	936,322
D. NON-OPERATIONAL COSTS:										
NON-OPERATIONAL COSTS (599)	0.00	0	0	5,431	4,655	5,431	4,733	20,250	0	20,250
ENVIRONMENTAL HEALTH SURCHARGE (399)	0.00	0	0	9,085	7,787	9,085	7,916	33,873	0	33,873
MEDICAID BUYBACK (611)	0.00	0	0	495	425	495	432	1,847	0	1,847
NON-OPERATIONAL COSTS SUBTOTAL	0.00	0	0	15,011	12,867	15,011	13,081	55,970	0	55,970
TOTAL CONTRACT	100.45	28,030	464,585	2,827,963	2,424,117	2,827,963	2,464,194	5,504,078	5,040,159	10,544,237

ATTACHMENT III

OKALOOSA COUNTY HEALTH DEPARTMENT

CIVIL RIGHTS COMPLIANCE AND NON-DISCRIMINATION CERTIFICATE

1. The CHD 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.
2. The CHD assures that it will comply with 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.
3. Assurance of Civil Rights Compliance: The CHD hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d *et seq.*); Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 *et seq.*); Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794); the Age Discrimination Act of 1975 (42 U.S.C. 6101 *et seq.*); Title II and Title III of the Americans with Disabilities Act (ADA) of 1990, as amended by the ADA Amendment Act of 2008 (42 U.S.C. 12131-12189) and as implemented by Department of Justice regulations at 28 CFR Parts 35 and 36; Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency" (August 11, 2000); all provisions required by the implementing regulations of the U.S. Department of Agriculture (7 CFR Part 15 *et seq.*); and FNS directives and guidelines to the effect that no person shall, on the ground of race, color, national origin, age, sex, or disability, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity for which the agency receives Federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.

By providing this assurance, the CHD agrees to compile data, maintain records and submit records and reports as required to permit effective enforcement of the nondiscrimination laws, and to permit Department personnel during normal working hours to review and copy such records, books and accounts, access such facilities, and interview such personnel as needed to ascertain compliance with the non-discrimination laws. If there are any violations of this assurance, the Department of Agriculture shall have the right to seek judicial enforcement of this assurance.

This assurance is given in consideration of and for the purpose of obtaining any and all Federal financial assistance, grants, and loans of Federal funds, reimbursable expenditures, grant or donation of Federal property and interest in property, the detail of Federal personnel, the sale and lease of, and the permission to use Federal property or interest in such property or the furnishing of services without consideration or at a nominal consideration, or at a consideration that is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be served by such sale, lease, or furnishing of services to the recipient, or any improvements made with Federal financial assistance extended to the Program applicant by USDA. This includes any Federal agreement, arrangement, or other contract that has as one of its purposes the provision of cash assistance for the purchase of food, and cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.

This assurance is binding on the CHD, its successors, transferees, and assignees as long as it receives or retains possession of any assistance from the Department. The person or persons whose signatures appear below are authorized to sign this assurance on the behalf of the CHD.

4. Confidentiality of Data, Files, and Records: The CHD agrees to restrict the use and disclosure of confidential USDA, Women, Infant, and Children (WIC) applicant and participant information as specified in 7 CFR § 246.26(d)(1)(i) in accordance with 7 CFR § 246.26(d)(1)(ii), as applicable.

Attachment IV
 Fiscal Year - 2023 - 2024
 Okaloosa County Health Department
 Facilities Utilized by the County Health Department

Complete Location <small>(Street Address, City, Zip)</small>	Facility Description And Official Building Name (if applicable) <small>(Admin, Clinic, Envrn Hlth, etc.)</small>	Lease/ Agreement Number	Type of Agreement <small>(Private Lease thru State or County, other - please define)</small>	Complete Legal Name of Owner	SQ Feet	Employee Count <small>(FTE/OPS/ Contract)</small>
221 Hospital Drive Northeast Fort Walton Beach, Florida 32548	Med Svcs, Env Hlth, Epi, CHI, PHP, WIC 525A	N/A	County In-kind	Okaloosa County	34,599	86
810 East James Lee Blvd Crestview, Florida 32539	Med Svcs, Dental, Env Hlth, WIC , 013A	N/A	County In-kind	Okaloosa County	10,052	24

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
OKALOOSA COUNTY HEALTH DEPARTMENT
SPECIAL PROJECTS SAVINGS PLAN

CASH RESERVED OR ANTICIPATED TO BE RESERVED FOR PROJECTS

<u>CONTRACT YEAR</u>	<u>STATE</u>	<u>COUNTY</u>	<u>TOTAL</u>
2022-2023*	\$ <u> 0</u>	\$ <u> 0</u>	\$ <u> 0</u>
2023-2024**	\$ <u> 0</u>	\$ <u> 0</u>	\$ <u> 0</u>
2024-2025***	\$ <u> 0</u>	\$ <u> 0</u>	\$ <u> 0</u>
2025-2026***	\$ <u> 0</u>	\$ <u> 0</u>	\$ <u> 0</u>
PROJECT TOTAL	\$ <u> 0</u>	\$ <u> 0</u>	\$ <u> 0</u>

SPECIAL PROJECTS CONSTRUCTION/RENOVATION PLAN

PROJECT NUMBER: _____

PROJECT NAME: _____

LOCATION/ADDRESS: _____

PROJECT TYPE:

NEW BUILDING	_____ ROOFING	_____
RENOVATION	_____ PLANNING STUDY	_____
NEW ADDITION	_____ OTHER	_____

SQUARE FOOTAGE: _____ 0

PROJECT SUMMARY: *Describe scope of work in reasonable detail.*

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 9/30/23
 ** Cash to be transferred to FCO account.
 *** Cash anticipated for future contract years.