Georgia Department of Public Health Amendment #3

Solicitation Title Exempt – Intergovernmental	Solicitation Number N/A		Contract Number 40500-042-23234455			
1. This Contract Amendment is entered into between the Georgia Department of Public Health and the Contractor named below:						
DeKalb County Government (hereafter called "Contractor")						
Current Contract Renewal Begin Date:	Contract End Date: 09/30/2026					
10/01/2025	Amendment Effective Date: 10/01/2025					
3. Current Amount of this	Amendment		Amended Total Contract	Total Amount for Next		
Contract:	Amount:		Amount:	Renewal Period: \$877,856.00		
\$877,856.00	\$0		\$877,856.00	\$677,050.00		
WITNESS WHEREOF, this Contract Amendment has been executed by the parties hereto.						
4. Contractor's Name (If other than an individual, state whether a corporation, partnership, etc.)						
DeKalh County Governm	ent (hereafter called "Cor	ntrac	tor")			
By (Authorized Signature, if required)			Date Signed			
Joseph (achian)	phoser		9/29/2025			
Printed Name			Title of Person Signing			
Lorraine Cochran-Johnson			Chief Executive Officer, Dekalb County			
5.		201735				
	of Public Health (hereafte	r call	ed "DPH" or "Departme	nt")		
By (Authorized Signature, if required)			Date Signed			
Kathleen E. Toomey, M.D., M.P.H.			10/06/2025			
Printed Name			Title of Person Signing			
Kathleen E. Toomey, M.D., M.P.	.н.		Commissioner			
6. In consideration of the mutual promises of the Parties, the terms, provisions and conditions of this Amendment and other good and valuable consideration, the sufficiency of which is hereby acknowledged, DPH and Contractor hereby agree as follows:						
Delete: Section 7 Authorized N	Intice Person to Peceive	Δdd	: Section 7, Authorized Notice P	erson to Receive Contract		
Contract Notices for Department, Contract Administrator, of No.		Notic	otices for Department, Contract Administrator, of Amendment			
CONTRACTOR RESPONSIBILITIES, of Attachment 5, of CON			id: Item 1 of Paragraph A of Section 2 SPECIFIC			
			CONTRACTOR RESPONSIBILITIES, of Attachment 5, of Amendment #3.			
			ld: Attachment 8: Federal Sub-Recipient Addendum for Sub- vards of Amendment #3.			
Except as otherwise expressly set forth herein, the terms and conditions contained in the Contract are unchanged.						

Amendment #3

I. Section 7 Authorized Persons to Receive Contract Notices for Department, Contract Administrator, of Amendment #2 shall be deleted in its entirety and replaced with the following:

Contract Administrator:

Raquel McBean 200 Piedmont Ave. SE West Tower, 19th Floor Atlanta, Georgia 30334 Phone: 470-867-1725

Email: raquel.mcbean@dph.ga.gov

- II. Item 1 of Paragraph A, of Section 2 Specific Contractor Responsibilities, of Attachment 5, of Amendment 1 shall be deleted in its entirety and replaced with the following:
 - 1. Using PAT Evidence-based home visiting model, the Contractor shall provide services to the projected caseload of **one hundred eighty (180) families** each month and a projected 1000 families served in the First Step program each fiscal year.
- III. Attachment 8: Federal Sub-Recipient Addendum for Sub-Awards of Amendment #2 shall be deleted in its entirety and replaced with the attached Attachment 8: Federal Sub-Recipient Addendum for Sub-Awards of Amendment #3.

ATTACHMENT # 8 FEDERAL SUB-RECIPIENT ADDENDUM FOR SUB-AWARDS

The Contractor's status as "sub-recipient" as that term is defined in 2 C.F.R. § 200.330 imposes additional identification of the sub-award and disclosure of information as required by 2 C.F.R. § 200.331.

1. Federal Award Identification:

- a. Sub-recipient Name (must match registered name in SAM): **DeKalb County Government**
- b. Sub-recipient's Unique Entity Identifier (UEI): **K8G5TL8B1CX7** (12 alphanumeric characters)
- c. Federal Award Identification Number (FAIN): X1053642
- d. Date Award signed by Federal Agency: 08/27/2024
- e. Sub-award Period of Performance Start and End Date: 10/1/2025 9/29/2026
- f. Federal Funds Obligated by this Action: \$0.00
- g. Federal funds Obligated to Sub-recipient: \$877,856.00
- h. Total Amount of Federal Award: \$9,648,401.00
- i. Federal Award Project Description: Maternal, Infant and Early Childhood Homevisiting Grant Program
- j. Name of Federal Awarding agency: U.S. Department of Health and Human Services
- k. Name of pass-through entity: Georgia Department of Public Health
- Contact information for awarding official: HRSA, OFAM, DGMO, MCHSB, 5600 Fishers Ln, Rockville, MD 20852-1750
- m. CFDA Name: Maternal, Infant and Early Childhood Homevisiting Grant Program (MIECHV)
- n. CFDA Number: 93.870

Ο.	Research and Development Contract:	□ Yes	⊠ No
p.	Indirect Cost Rate: N/A		

2. Contractor must comply with the following provisions:

- a. Contractor shall allow Department to monitor activities to ensure use of the funds complies with the authorized purposes in compliance with Federal laws, regulations and the provisions of contracts or grant agreements and that performance goals are achieved.
- b. Contractor must submit the final invoice within 45 days of the end of the period of performance or such other date as specified by the sub-award and label final invoices as FINAL to allow for timely closeout of the sub-award. Invoices submitted later than 45 days from the end date of performance may not be paid.