Division of Public Health
Agreement Addendum
FY 26-27

Caldwell County Health Department **Local Health Department Legal Name**	Local and Community Support / Local Technical Assistance and Training **DPH Section / Branch Name**
121 ARPA TSF Public Health Services **Activity Number and Description**	Susan H. Little, 919-215-4471 susan.little@dhhs.nc.gov **DPH Program Contact** (name, phone number, and email)
06/01/2026 – 05/31/2027 **Service Period**	**DPH Program Signature** **Date** (only required for a negotiable Agreement Addendum)
07/01/2026 – 06/30/2027 **Payment Period**	

☒ Original Agreement Addendum
☐ Agreement Addendum Revision # ___

I. <u>Background</u>:

This funding, provided through budget receipts transferred from the ARPA Temporary Savings fund and made available through the NCGA 2023 Appropriations Act, HB 259, provides a $50,000 grant in each year of the 2023-2025 fiscal biennium to each local health department to support activities authorized under the General Aid-to-Counties Agreement Addendum including the delivery of the 10 Essential Public Health Services per GS § 130A-1.1.[1], the core functions of public health (Assessment, Policy Development, Assurance), and the specific health needs or health status indicators selected by each local health department**.**

Per HB 259, Section 4.7.(i), "The funds appropriated from the State Fiscal Recovery Fund in this act and in prior enactments of the General Assembly shall not revert at the end of each fiscal year of the 2023-2025 fiscal biennium but shall remain available to expend and appropriate until the date set by applicable federal law or guidance."

II. <u>Purpose</u>:

This Agreement Addendum for Activity 121 further enhances the ability of local health departments to deliver the essential services and core functions of public health to address the specific health needs or health status indicators selected by the local health department.

[1] https://www.ncleg.gov/EnactedLegislation/Statutes/PDF/ByArticle/Chapter_130A/Article_1.pdf

Health Director Signature (use blue ink or verifiable digital signature) _____ Date _____

LHD to complete:
[For DPH to contact in case follow-up information is needed.]
LHD program contact name: _____
Phone and email address: _____

Signature on this page signifies you have read and accepted all pages of this document.

The North Carolina General Statute § 130A-1.1(b) states: a local health department shall ensure that the following **10 Essential Public Health Services** are available and accessible to the population in each county served by the local health department:

Assessment

1. Monitor health status to identify community health problems.
2. Diagnose and investigate health problems and health hazards in the community.

Policy Development

3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.

Assurance

6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure a competent public health and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

III. Scope of Work and Deliverables:

These funds may be used for any public health program or purpose, any locally identified need or current health status indicator, and to support the delivery of the core functions of public health and 10 Essential Public Health Services. The Local Health Department must report at the end of the fiscal year how the funds were spent related to the 10 Essential Public Health Services and core public health functions to address priority health needs or health status indicators selected by each local health department. Use of these funds may NOT supplant current state, federal or local funding.

To qualify for these funds, the Local Health Department must have a Permanent or Interim Health Director per NC GS § 130A-40. In addition, if that Health Director has never served in that role in North Carolina previously, that Health Director must participate in the *Orientation for New Local Health Directors* coordinated by the North Carolina Association of Local Health Directors. Additionally, the Local Health Department must be currently accredited by the North Carolina Local Health Department Accreditation Board.

IV. Performance Measures / Reporting Requirements:

1. **Performance Measures**

   a. **Measure #1:** The LHD shall invest this funding in specific health needs or health indicators including but not limited to the 10 Essential Public Health Services or core public health functions.

   b. **Measure #2**: The LHD shall identify the specific health needs or health status indicators selected for prioritization under this funding.

   c. **Measure #3:** The LHD shall identify the impact funding will have/had on the identified health needs or health status indicators selected for prioritization.

2. **Reporting Requirements via Smartsheet**
   The DPH Smartsheet Reporting Portal is the centralized website for the LHD to submit required reports. The Main Page provides a link to each active DPH Activity Page and is accessed at https://app.smartsheet.com/b/publish?EQBCT=82018408e7b44ef9b44e113b6e536ffbv.

Complete the following reports **by June 30, 2027**:

a. **Expenditures by Type Report**: LHD will provide funding expenditures by type for the annual reporting period.
    1. Personnel (Salaries, Fringe, Benefits, etc. Do not include contracted staff)
    2. Training and Education
    3. Travel and Mileage
    4. Medical Supplies
    5. Office/Administrative Supplies
    6. Contracted Services (included contracted staff)
    7. Other administrative costs (specify)
    8. Other (specify)

b. **Prioritized Health Needs or Indicators Reports**: LHD will select one or more of the following health needs or indicators prioritized for the annual reporting period:
    1. Environmental Health
    2. Communicable Disease
    3. Maternal Health
    4. Child Health
    5. Chronic Disease
    6. Injury Prevention
    7. Access to or Linkage to Care
    8. Mental Health
    9. Behavioral Health
    10. Other health needs or indicators

c. **Statement of Impact Report:** LHD will provide at least one example from Fiscal Year 2027 that demonstrates how these funds have improved the health of your community. This could include improved access to care, better health outcomes, services provided to clients, or a specific initiative, activity, or service made possible through this funding.

3. **Reporting Required Subcontract Information**

In accordance with revised NCDHHS guidelines effective October 1, 2024, the LHD must provide the information listed below for <u>every subcontract</u> receiving funding from the LHD to carry out any or all of this Agreement Addendum's work.

This information is <u>not</u> to be returned with the signed Agreement Addendum (AA) but <u>is</u> to be provided to DPH when the entities are known by the LHD.

a. Subcontracts are contracts or agreements issued by the LHD to a vendor ("Subcontractor") or a pass-through entity ("Subrecipient").
    1. <u>Subcontractors</u> are vendors hired by the LHD via a contract to provide a good or service required by the LHD to perform or accomplish specific work outlined in the executed AA. For example, if the LHD needed to build a data system to satisfy an AA's reporting requirements, the vendor hired by the LHD to build the data system would be a Subcontractor. (However, not all Vendors are considered Subcontractors. Entities performing general administrative services for the LHD (e.g., certified professional accountants) are not considered Subcontractors.)

2. Subrecipients of the LHD are those that receive DPH pass-through funding from the LHD via a contract or agreement for them to carry out all or a portion of the programmatic responsibilities outlined in the executed AA. (Subrecipients are also referred to as Subgrantees in NCAC.)

The following information must be submitted via Smartsheet for review prior to the entity being awarded a contract or agreement from the LHD:

- Organization or Individual's Name (if an individual, include the person's title)
- EIN or Tax ID
- Street Address or PO Box
- City, State and ZIP Code
- Contact Name
- Contact Email
- Contact Telephone
- Fiscal Year End Date (of the entity)
- State whether the entity is functioning as a pass-through entity Subcontractor or Subrecipient of the LHD.

V. Performance Monitoring and Quality Assurance:

The LTAT Branch will monitor performance by reviewing the annual Expenditures by Type Report, the Prioritized Health Needs or Indicators and Statement of Impact Reports. These financial and performance reports are provided by the LHD via the Smartsheet dashboard.

If the LHD seeks assistance in clarifying any part of this Agreement Addendum's requirements, LTAT Branch staff shall provide technical assistance upon request. If additional information is required, a phone conference will be conducted.

VI. Funding Guidelines or Restrictions:

1. **Federal Funding Requirements**: where federal grant dollars received by the Division of Public Health (DPH) are passed through to the Local Health Department (LHD) for all or any part of this Agreement Addendum (AA).

   a. Requirements for Pass-through Entities: In compliance with 2 CFR §200.331 – *Requirements for pass-through entities*, DPH provides Federal Award Reporting Supplements (FASs) to the LHD receiving federally funded AAs.

      1. Definition: An FAS discloses the required elements of a single federal award. FASs address elements of federal funding sources only; state funding elements will not be included in the FAS. An AA funded by more than one federal award will receive a disclosure FAS for each federal award.
      2. Frequency: An FAS will be generated as DPH receives information for federal grants. FASs will be issued to the LHD throughout the state fiscal year. For a federally funded AA, an FAS will accompany the original AA. If an AA is revised and if the revision affects federal funds, the AA Revision will include an FAS. FASs can also be sent to the LHD even if no change is needed to an AA. In those instances, the FAS will be sent to provide newly received federal grant information for funds already allocated in the existing AA.

   b. Required Reporting Certifications: Per the revised Uniform Guidance, 2 CFR 200, if awarded federal pass-through funds, the LHD as well as all subrecipients of the LHD must certify the following whenever 1) applying for funds, 2) requesting payment, and 3) submitting financial reports:

"I certify to the best of my knowledge and belief that the information provided herein is true, complete, and accurate. I am aware that the provision of false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative consequences including, but not limited to violations of U.S. Code Title 18, Sections 2, 1001, 1343 and Title 31, Sections 3729-3730 and 3801-3812."

2. **Funding Reductions and Terminations**: In the event a funding source supporting this Agreement Addendum (AA) is reduced or withdrawn by the original Awarding Agency, the Local Health Department (LHD) shall be required to return to the Division of Public Health (DPH) a share commensurate with the reduction of funds previously obligated and/or disbursed to the LHD.
   a. The original Awarding Agency is the entity that awarded the funding to NCDHHS. The Awarding Agency will be either a federal agency (identified on the Federal Award Supplement [FAS] document sent to the LHD) or the North Carolina General Assembly.
   b. Reductions and/or terminations may be implemented retroactively to align with the original Awarding Agency's funding directive.
   c. The repayment amount will be determined by DPH, based on the reduction applied to the LHD's funding allocation.
   d. Funding reductions and terminations will be processed as an AA revision and will include a revised Budgetary Estimate (BE), a revised FAS, and repayment instructions.

3. The Local Health Department is not required to seek prior approval to use the funds. The funds shall be used for the delivery of the 10 Essential Public Health Services per GS § 130A-1.1.[2], the core functions of public health (Assessment, Policy Development, Assurance), or the specific health needs or health status indicators selected by each Local Health Department**.**

[2] https://www.ncleg.gov/EnactedLegislation/Statutes/PDF/ByArticle/Chapter_130A/Article_1.pdf

DHHS-Aid-To-Counties

Fiscal Year: 26/27

Budgetary Estimate No. : **0**

Activity 121 Service Period Payment Period		AA	131204 2BTS190 2000400000 06/01-05/31 07/01-06/30	Total Allocated	Proposed Total	New Total
01 Alamance			0	$0.00	0	0
D1 Albemarle			0	$0.00	0	0
02 Alexander			0	$0.00	0	0
04 Anson			0	$0.00	0	0
D2 Appalachian			0	$0.00	0	0
07 Beaufort			0	$0.00	0	0
09 Bladen	*	0	78,868	$0.00	78,868	78,868
10 Brunswick			0	$0.00	0	0
11 Buncombe			0	$0.00	0	0
12 Burke			0	$0.00	0	0
13 Cabarrus			0	$0.00	0	0
14 Caldwell	*	0	26,401	$0.00	26,401	26,401
16 Carteret			0	$0.00	0	0
17 Caswell	*	0	63,719	$0.00	63,719	63,719
18 Catawba			0	$0.00	0	0
19 Chatham			0	$0.00	0	0
20 Cherokee			0	$0.00	0	0
22 Clay			0	$0.00	0	0
23 Cleveland			0	$0.00	0	0
24 Columbus	*	0	8,064	$0.00	8,064	8,064
25 Craven			0	$0.00	0	0
26 Cumberland			0	$0.00	0	0
28 Dare			0	$0.00	0	0
29 Davidson			0	$0.00	0	0
30 Davie			0	$0.00	0	0
31 Duplin			0	$0.00	0	0

32 Durham			0	$0.00	0	0
33 Edgecombe			0	$0.00	0	0
D7 Foothills			0	$0.00	0	0
34 Forsyth			0	$0.00	0	0
35 Franklin			0	$0.00	0	0
36 Gaston			0	$0.00	0	0
38 Graham			0	$0.00	0	0
D3 Gran-Vance			0	$0.00	0	0
40 Greene			0	$0.00	0	0
41 Guilford			0	$0.00	0	0
42 Halifax			0	$0.00	0	0
43 Harnett			0	$0.00	0	0
44 Haywood	*	0	15,414	$0.00	15,414	15,414
45 Henderson			0	$0.00	0	0
47 Hoke			0	$0.00	0	0
48 Hyde			0	$0.00	0	0
49 Iredell			0	$0.00	0	0
50 Jackson			0	$0.00	0	0
51 Johnston			0	$0.00	0	0
52 Jones			0	$0.00	0	0
53 Lee	*	0	146	$0.00	146	146
54 Lenoir			0	$0.00	0	0
55 Lincoln	*	0	1,613	$0.00	1,613	1,613
56 Macon	*	0	20,864	$0.00	20,864	20,864
57 Madison			0	$0.00	0	0
D4 M-T-W	*	0	98	$0.00	98	98
60 Mecklenburg			0	$0.00	0	0
62 Montgomery			0	$0.00	0	0
63 Moore			0	$0.00	0	0
64 Nash	*	0	26,364	$0.00	26,364	26,364
65 New Hanover	*	0	25,661	$0.00	25,661	25,661
66 Northampton			0	$0.00	0	0
67 Onslow			0	$0.00	0	0
68 Orange			0	$0.00	0	0
69 Pamlico	*	0	5,149	$0.00	5,149	5,149
71 Pender			0	$0.00	0	0
73 Person			0	$0.00	0	0
74 Pitt			0	$0.00	0	0

75 Polk	*	**0**	14,390	**$0.00**	14,390	14,390
76 Randolph			0	**$0.00**	0	0
77 Richmond			0	**$0.00**	0	0
78 Robeson	*	**0**	5,096	**$0.00**	5,096	5,096
79 Rockingham	*	**0**	28,839	**$0.00**	28,839	28,839
80 Rowan	*	**0**	6,403	**$0.00**	6,403	6,403
82 Sampson			0	**$0.00**	0	0
83 Scotland	*	**0**	86,505	**$0.00**	86,505	86,505
84 Stanly	*	**0**	303	**$0.00**	303	303
85 Stokes			0	**$0.00**	0	0
86 Surry			0	**$0.00**	0	0
87 Swain			0	**$0.00**	0	0
D6 Toe River			0	**$0.00**	0	0
88 Transylvania			0	**$0.00**	0	0
90 Union	*	**0**	59,603	**$0.00**	59,603	59,603
92 Wake			0	**$0.00**	0	0
93 Warren			0	**$0.00**	0	0
96 Wayne			0	**$0.00**	0	0
97 Wilkes			0	**$0.00**	0	0
98 Wilson			0	**$0.00**	0	0
99 Yadkin	*	**0**	18,343	**$0.00**	18,343	18,343
00 Yancey			0	**$0.00**	0	0
Totals			491,843	0	491,843	491,843

Sign and Date - DHHS Program Administrator

Signed by: Susan Little BD22B67CD714491

07/23/26 | 11:50 AM EDT

Sign and Date - DHHS Section Chief

Signed by: 7EEF0ED643664E7

07/23/26 | 11:56 AM EDT

Sign and Date - DHHS Budget Office – ATC Coordinator

7/3/2026

Sign and Date - DHHS Budget Officer

7/24/2026

SH 7/23/2026