

## GRANT SUMMARY SHEET

**Grant Name:** Public Health Emergency Preparedness and Crisis Response 20-21 Amend. 2

**Department:** HEALTH DEPARTMENT

**Grantor:** U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

**Pass-Through Grantor  
(If applicable):** TENN. DEPT. OF HEALTH

**Total Award this Action:** \$26,000,000.00

**Cash Match Amount:** \$0.00

**Department Contact:** Brad Thompson  
340-0407

**Status:** AMENDMENT

**Program Description:**

This is a grant from Tennessee Department of Health to respond and recover from Covid-19. Amendment 2 adds an additional \$26,000,000.00 for a new total of \$26,086,400. This amendment also extends the end date from 6/30/21 to 6/30/23.

**Plan for continuation of services upon grant expiration:**

The services would be discontinued

### Grants Tracking Form

Part One

Pre-Application <input type="radio"/>		Application <input type="radio"/>		Award Acceptance <input type="radio"/>		Contract Amendment <input type="radio"/>	
Department	Dept. No.	Contact			Phone	Fax	
HEALTH DEPARTMENT	038	Brad Thompson			340-0407		
<b>Grant Name:</b>		Public Health Emergency Preparedness and Crisis Response 20-21 Amend. 2					
<b>Grantor:</b>		U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES			<b>Other:</b>		
<b>Grant Period From:</b>		03/16/20	(applications only) Anticipated Application Date:				
<b>Grant Period To:</b>		06/30/23	(applications only) Application Deadline:				
<b>Funding Type:</b>		FED PASS THRU	<b>Multi-Department Grant</b>		<input type="checkbox"/> If yes, list below.		
<b>Pass-Thru:</b>		TENN. DEPT. OF HEALTH	<b>Outside Consultant Project:</b>		<input type="checkbox"/>		
<b>Award Type:</b>		FORMULA	<b>Total Award:</b>		\$26,000,000.00		
<b>Status:</b>		AMENDMENT	<b>Metro Cash Match:</b>		\$0.00		
<b>Metro Category:</b>		Est. Prior.	<b>Metro In-Kind Match:</b>		\$0.00		
<b>CFDA #</b>		93.074	<b>Is Council approval required?</b>		<input checked="" type="checkbox"/>		
<b>Project Description:</b>		Applic. Submitted Electronically?		<input type="checkbox"/>			
<p>This is a grant from Tennessee Department of Health to respond and recover from Covid-19. Amendment 2 adds an additional \$26,000,000.00 for a new total of \$26,086,400. This amendment also extends the end date from 6/30/21 to 6/30/23.</p>							
<b>Plan for continuation of service after expiration of grant/Budgetary Impact:</b>							
The services would be discontinued							
<b>How is Match Determined?</b>							
<b>Fixed Amount of \$</b>		or		<b>% of Grant</b>		<b>Other:</b> <input type="checkbox"/>	
<b>Explanation for "Other" means of determining match:</b>							
<b>For this Metro FY, how much of the required local Metro cash match:</b>							
<b>Is already in department budget?</b>				<b>Fund</b>	<b>Business Unit</b>		
<b>Is not budgeted?</b>				<b>Proposed Source of Match:</b>			
<b>(Indicate Match Amount &amp; Source for Remaining Grant Years in Budget Below)</b>							
<b>Other:</b>							
<b>Number of FTEs the grant will fund:</b>		23.75		<b>Actual number of positions added:</b>		0.00	
<b>Departmental Indirect Cost Rate</b>		22.91%		<b>Indirect Cost of Grant to Metro:</b>		\$5,976,029.03	
<b>*Indirect Costs allowed?</b>		<input checked="" type="radio"/> Yes <input type="radio"/> No		<b>% Allow.</b>		17.00%	
				<b>Ind. Cost Requested from Grantor:</b>		\$4,427,700.00	
				<b>in budget</b>			
<b>*If "No", please attach documentation from the grantor that indirect costs are not allowable. See Instructions)</b>							
<b>Draw down allowable?</b> <input type="checkbox"/>							
<b>Metro or Community-based Partners:</b>							

Part Two

Grant Budget										
Budget Year	Metro Fiscal Year	Federal Grantor	State Grantor	Other Grantor	Local Match Cash	Match Source (Fund, BU)	Local Match In-Kind	Total Grant Each Year	Indirect Cost to Metro	Ind. Cost Neg. from Grantor
Yr 1	FY20	\$43,200.00			\$0.00		\$0.00	\$43,200.00	\$9,896.52	\$0.00
Yr 2	FY21	\$7,974,800.00			\$0.00		\$0.00	\$7,974,800.00	\$1,826,915.03	\$1,336,300.00
Yr 3	FY22	\$12,119,700.00			\$0.00		\$0.00	\$12,119,700.00	\$2,776,453.59	\$2,100,000.00
Yr 4	FY23	\$5,948,700.00			\$0.00		\$0.00	\$5,948,700.00	\$1,362,763.89	\$991,400.00
Yr 5	FY									
<b>Total</b>		\$26,086,400.00			\$0.00		\$0.00	\$26,086,400.00	\$5,976,029.03	\$4,427,700.00
<b>Date Awarded:</b>				07/09/21	<b>Tot. Awarded:</b>		\$26,000,000.00	<b>Contract#:</b> 34349-97220-2		
<b>(or) Date Denied:</b>					<b>Reason:</b>					
<b>(or) Date Withdrawn:</b>					<b>Reason:</b>					

Contact: [trinity.weathersby@nashville.gov](mailto:trinity.weathersby@nashville.gov)  
[vaughn.wilson@nashville.gov](mailto:vaughn.wilson@nashville.gov)

GCP Rec'd  
07/15/21

GCP Approved  
07/15/21

*VW*



## GRANT AMENDMENT

<b>Agency Tracking #</b> 34349-97220	<b>Edison ID</b> 68699	<b>Contract #</b> GG-20-68699	<b>Amendment #</b> 2		
<b>Contractor Legal Entity Name</b> Metropolitan Government of Nashville and Davidson County			<b>Edison Vendor ID</b> 4		
<b>Amendment Purpose &amp; Effect(s)</b> Add additional ELC-Enhancing Detection Scope and funds for COVID Response					
<b>Amendment Changes Contract End Date:</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<b>End Date:</b> June 30, 2023			
<b>TOTAL Contract Amount INCREASE or DECREASE per this Amendment</b> (zero if N/A):			<b>\$ 26,000,000.00</b>		
<b>Funding —</b>					
<b>FY</b>	<b>State</b>	<b>Federal</b>	<b>Interdepartmental</b>	<b>Other</b>	<b>TOTAL Contract Amount</b>
2020		\$43,200.00			\$43,200.00
2021		\$7,974,800.00			\$7,974,800.00
2022		\$12,119,700.00			\$12,119,700.00
2023		\$5,948,700.00			\$5,948,700.00
<b>TOTAL:</b>		<b>\$26,086,400.00</b>			<b>\$26,086,400.00</b>
<b>Budget Officer Confirmation:</b> There is a balance in the appropriation from which obligations hereunder are required to be paid that is not already encumbered to pay other obligations.  <div style="text-align: center; font-size: 1.2em; font-family: cursive;">Eric Buchholz</div>				<i>CPO USE</i>  <div style="font-size: 1.5em; font-weight: bold;">GG-20-68699-02</div>	
				<b>Speed Chart</b> (optional) HL00018456 HL00018529	<b>Account Code</b> (optional)  71301000

**AMENDMENT TWO  
OF GRANT CONTRACT GG-20-68699**

This Grant Contract Amendment is made and entered by and between the State of Tennessee, Department of Health, hereinafter referred to as the "State" and Metropolitan Government of Nashville and Davidson County, hereinafter referred to as the "Grantee." It is mutually understood and agreed by and between said, undersigned contracting parties that the subject Grant Contract is hereby amended as follows:

1. Grant Contract Section A.2. Definitions, is amended to include the following:
  - e. ELC Enhancing Detection – A supplemental grant to the yearly Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) Grant, meant to directly address the COVID-19 Pandemic.
2. Grant Contract Section A.5. Service Description, is amended to include the following:
  - j. Additional ELC Enhancing Detection funds will be used to directly address the COVID-19 Pandemic by responding to and recovering from this public health threat. These funds are being issued in support of the following COVID-19 response costs: COVID-19 response support personnel, benefits, indirect costs associated with response personnel, lab processing fees, travel, equipment purchase, supplies, shipping costs, printing, computer related items and fees, costs associated with quarantine/isolation, costs associated with operating alternate/pop-up testing sites, testing of uninsured, costs associated with educating the public on personal health behaviors and choices, and other associated costs throughout this response and recovery.
3. Grant Contract Section B. is deleted in its entirety and replaced with the following:

**B. TERM OF CONTRACT:**

This Grant Contract shall be effective for the period beginning on March 16, 2020 ("Effective Date") and ending on June 30, 2023, ("Term"). The State shall have no obligation to the Grantee for fulfillment of the Scope outside the Term.

4. Grant Contract Attachment 1 and the FAIW are deleted in their entirety and replaced with the new Attachment 1 and FAIW attached hereto.

Required Approvals. The State is not bound by this Amendment until it is signed by the contract parties and approved by appropriate officials in accordance with applicable Tennessee laws and regulations (depending upon the specifics of this contract, said officials may include, but are not limited to, the Commissioner of Finance and Administration, the Commissioner of Human Resources, and the Comptroller of the Treasury).

Amendment Effective Date. The revisions set forth herein shall be effective once all required approvals are obtained. All other terms and conditions of this Grant Contract not expressly amended herein shall remain in full force and effect.

This space intentionally blank.

IN WITNESS WHEREOF, the parties have by their duly authorized representatives set their signatures.

**METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY**

DocuSigned by:  
*Tina Lester* 7/14/2021  
 \_\_\_\_\_  
 Director, Metro Public Health Department Date

DocuSigned by:  
*Alex Jahanjir* 7/15/2021  
 \_\_\_\_\_  
 Chair, Board of Health Date

**APPROVED AS TO AVAILABILITY OF FUNDS:**

DocuSigned by:  
*Kevin Crumbo/mjw* 7/23/2021  
 \_\_\_\_\_  
 Director, Department of Finance Date

**APPROVED AS TO RISK AND INSURANCE:**

DocuSigned by:  
*Balogun Cobb* 7/23/2021  
 \_\_\_\_\_  
 Director of Risk Management Services Date

**APPROVED AS TO FORM AND LEGALITY:**

DocuSigned by:  
*Meki Eke* 7/23/2021  
 \_\_\_\_\_  
 Metropolitan Attorney Date

\_\_\_\_\_  
 Metropolitan Mayor Date

**ATTEST:**

\_\_\_\_\_  
 Metropolitan Clerk Date

**DEPARTMENT OF HEALTH:**

**LISA PIERCEY, MD, MPH, FAAP, COMMISSIONER**

**DATE**

ATTACHMENT 1

A2-FY21 \*To Extend End Date to June 30, 2023 and add ELC-ED Expansion Funds

GRANT BUDGET

(BUDGET PAGE 1)

Nashville Davidson County Health Department - Epidemiology and Laboratory Capacity for Infectious Diseases (ELC), Enhancing Detection and Public Health Emergency Preparedness (PHEP) Base Activities				
APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning March 16, 2020, and ending June 30, 2023.				
POLICY 03 Object Line-item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY <sup>1</sup> (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE MATCH <sup>3</sup>	TOTAL PROJECT
1	Salaries <sup>2</sup>	\$3,043,500.00	\$0.00	\$3,043,500.00
2	Benefits & Taxes	\$1,093,900.00	\$0.00	\$1,093,900.00
4, 15	Professional Fee/ Grant & Award <sup>2</sup>	\$6,943,400.00	\$0.00	\$6,943,400.00
5	Supplies	\$2,866,400.00	\$0.00	\$2,866,400.00
6	Telephone	\$231,500.00	\$0.00	\$231,500.00
7	Postage & Shipping	\$620,000.00	\$0.00	\$620,000.00
8	Occupancy	\$0.00	\$0.00	\$0.00
9	Equipment Rental & Maintenance	\$650,000.00	\$0.00	\$650,000.00
10	Printing & Publications	\$1,470,000.00	\$0.00	\$1,470,000.00
11, 12	Travel/ Conferences & Meetings <sup>2</sup>	\$220,000.00	\$0.00	\$220,000.00
13	Interest <sup>2</sup>	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals <sup>2</sup>	\$820,000.00	\$0.00	\$820,000.00
17	Depreciation <sup>2</sup>	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel <sup>2</sup>	\$0.00	\$0.00	\$0.00
20	Capital Purchase <sup>2</sup>	\$3,700,000.00	\$0.00	\$3,700,000.00
22	Indirect Cost (% and method)	\$4,427,700.00	\$0.00	\$4,427,700.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	<b>GRAND TOTAL</b>	<b>\$26,086,400.00</b>	<b>\$0.00</b>	<b>\$26,086,400.00</b>

<sup>1</sup> Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A*. (posted on the Internet at: <https://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>).

<sup>2</sup> Applicable detail follows this page if line-item is funded.

<sup>3</sup> A Grantee Match Requirement is detailed by this Grant Budget, and the maximum total amount reimbursable by the State pursuant to this Grant Contract, as detailed by the "Grant Contract" column above, shall be reduced by the amount of any Grantee failure to meet the Match Requirement.

## ATTACHMENT 1 (continued)

## GRANT BUDGET

(BUDGET PAGE 2)

Metropolitan Government of Nashville and Davidson County - Public Health Emergency Preparedness (PHEP)Base Activities				
APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning March 16, 2020, and ending June 30, 2020.				
Object Line-Item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY <sup>1</sup> (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE MATCH <sup>3</sup>	TOTAL PROJECT
1	Salaries <sup>2</sup>	\$0.00	\$0.00	\$0.00
2	Benefits & Taxes	\$0.00	\$0.00	\$0.00
4, 15	Professional Fee/ Grant & Award <sup>2</sup>	\$0.00	\$0.00	\$0.00
5	Supplies	\$33,200.00	\$0.00	\$33,200.00
6	Telephone	\$0.00	\$0.00	\$0.00
7	Postage & Shipping	\$0.00	\$0.00	\$0.00
8	Occupancy	\$0.00	\$0.00	\$0.00
9	Equipment Rental & Maintenance	\$0.00	\$0.00	\$0.00
10	Printing & Publications	\$0.00	\$0.00	\$0.00
11, 12	Travel/ Conferences & Meetings <sup>2</sup>	\$0.00	\$0.00	\$0.00
13	Interest <sup>2</sup>	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals <sup>2</sup>	\$10,000.00	\$0.00	\$10,000.00
17	Depreciation <sup>2</sup>	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel <sup>2</sup>	\$0.00	\$0.00	\$0.00
20	Capital Purchase <sup>2</sup>	\$0.00	\$0.00	\$0.00
22	Indirect Cost (% and method)	\$0.00	\$0.00	\$0.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	<b>GRAND TOTAL</b>	\$43,200.00	\$0.00	\$43,200.00

<sup>1</sup> Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A*. (posted on the Internet at: <https://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>).

<sup>2</sup> Applicable detail follows this page if line-item is funded.

<sup>3</sup> A Grantee Match Requirement is detailed by this Grant Budget, and the maximum total amount reimbursable by the State pursuant to this Grant Contract, as detailed by the "Grant Contract" column above, shall be reduced by the amount of any Grantee failure to meet the Match Requirement.

**ATTACHMENT 1 (continued)**  
**GRANT BUDGET LINE-ITEM DETAIL**  
**(BUDGET PAGE 3)**

SPECIFIC ASSISTANCE TO INDIVIDUALS	AMOUNT
Provide Language line assistance for COVID-19 Testing/Results/Information	\$10,000.00
ROUNDED TOTAL	\$10,000.00

## ATTACHMENT 1 (continued)

## GRANT BUDGET

(BUDGET PAGE 4)

**Nashville Davidson County Health Department - Epidemiology and Laboratory Capacity for Infectious Diseases (ELC), Enhancing Detection**

**APPLICABLE PERIOD:** The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2020, and ending June 30, 2021.

Object Line-item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY <sup>1</sup> (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE MATCH <sup>3</sup>	TOTAL PROJECT
1	Salaries <sup>2</sup>	\$700,000.00	\$0.00	\$700,000.00
2	Benefits & Taxes	\$139,900.00	\$0.00	\$139,900.00
4, 15	Professional Fee/ Grant & Award <sup>2</sup>	\$4,425,400.00	\$0.00	\$4,425,400.00
5	Supplies	\$800,000.00	\$0.00	\$800,000.00
6	Telephone	\$20,000.00	\$0.00	\$20,000.00
7	Postage & Shipping	\$20,000.00	\$0.00	\$20,000.00
8	Occupancy	\$0.00	\$0.00	\$0.00
9	Equipment Rental & Maintenance	\$50,000.00	\$0.00	\$50,000.00
10	Printing & Publications	\$20,000.00	\$0.00	\$20,000.00
11, 12	Travel/ Conferences & Meetings <sup>2</sup>	\$20,000.00	\$0.00	\$20,000.00
13	Interest <sup>2</sup>	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals <sup>2</sup>	\$200,000.00	\$0.00	\$200,000.00
17	Depreciation <sup>2</sup>	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel <sup>2</sup>	\$0.00	\$0.00	\$0.00
20	Capital Purchase <sup>2</sup>	\$200,000.00	\$0.00	\$200,000.00
22	Indirect Cost (% and method)	\$1,336,300.00	\$0.00	\$1,336,300.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	<b>GRAND TOTAL</b>	<b>\$7,931,600.00</b>	<b>\$0.00</b>	<b>\$7,931,600.00</b>

<sup>1</sup> Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A*. (posted on the Internet at: <https://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>).

<sup>2</sup> Applicable detail follows this page if line-item is funded.

<sup>3</sup> A Grantee Match Requirement is detailed by this Grant Budget, and the maximum total amount reimbursable by the State pursuant to this Grant Contract, as detailed by the "Grant Contract" column above, shall be reduced by the amount of any Grantee failure to meet the Match Requirement.

**ATTACHMENT 1 (continued)**  
**GRANT BUDGET LINE-ITEM DETAIL**  
 (BUDGET PAGE 5)

<b>SALARIES</b>				<b>AMOUNT</b>
Name, Title	Monthly Salary	# of Months	% of time	
OT for staff working COVID-related activities				\$700,000.00
<b>ROUNDED TOTAL</b>				<b>\$700,000.00</b>

501172	43400
501173	10150
501174	0
501175	0
501176	0
501177	86380
	\$ 139,930.00

<b>TRAVEL / CONFERENCES &amp; MEETINGS</b>	<b>AMOUNT</b>
Routine Travel	\$20,000.00
<b>ROUNDED TOTAL</b>	<b>\$20,000.00</b>

<b>PROFESSIONAL FEES/MANAGEMENT</b>	<b>AMOUNT</b>
Temporary Staffing	\$4,375,400.00
Provide Language line assistance for COVID-19 Testing/Results/Information	\$50,000.00
<b>ROUNDED TOTAL</b>	<b>\$4,425,400.00</b>

\$4,289,000.00

<b>SPECIFIC ASSISTANCE TO INDIVIDUALS</b>	<b>AMOUNT</b>
Food/lodging/transportation	\$200,000.00
<b>ROUNDED TOTAL</b>	<b>\$200,000.00</b>

## ATTACHMENT 1 (continued)

\*PHEP-COVID FY21

## GRANT BUDGET

(BUDGET PAGE 6)

Metropolitan Government of Nashville and Davidson County - Public Health Emergency Preparedness (PHEP)Base Activities				
APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2020 and ending June 30, 2021.				
Object Line-Item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY <sup>1</sup> (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE MATCH <sup>3</sup>	TOTAL PROJECT
1	Salaries <sup>2</sup>	\$0.00	\$0.00	\$0.00
2	Benefits & Taxes	\$0.00	\$0.00	\$0.00
4, 15	Professional Fee/ Grant & Award <sup>2</sup>	\$0.00	\$0.00	\$0.00
5	Supplies	\$33,200.00	\$0.00	\$33,200.00
6	Telephone	\$0.00	\$0.00	\$0.00
7	Postage & Shipping	\$0.00	\$0.00	\$0.00
8	Occupancy	\$0.00	\$0.00	\$0.00
9	Equipment Rental & Maintenance	\$0.00	\$0.00	\$0.00
10	Printing & Publications	\$0.00	\$0.00	\$0.00
11, 12	Travel/ Conferences & Meetings <sup>2</sup>	\$0.00	\$0.00	\$0.00
13	Interest <sup>2</sup>	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals <sup>2</sup>	\$10,000.00	\$0.00	\$10,000.00
17	Depreciation <sup>2</sup>	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel <sup>2</sup>	\$0.00	\$0.00	\$0.00
20	Capital Purchase <sup>2</sup>	\$0.00	\$0.00	\$0.00
22	Indirect Cost (% and method)	\$0.00	\$0.00	\$0.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	<b>GRAND TOTAL</b>	\$43,200.00	\$0.00	\$43,200.00

<sup>1</sup> Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A*. (posted on the Internet at: <https://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>).

<sup>2</sup> Applicable detail follows this page if line-item is funded.

<sup>3</sup> A Grantee Match Requirement is detailed by this Grant Budget, and the maximum total amount reimbursable by the State pursuant to this Grant Contract, as detailed by the "Grant Contract" column above, shall be reduced by the amount of any Grantee failure to meet the Match Requirement.

**ATTACHMENT 1 (continued)**  
**GRANT BUDGET LINE-ITEM DETAIL**  
**(BUDGET PAGE 7)**

SPECIFIC ASSISTANCE TO INDIVIDUALS	AMOUNT
Provide Language line assistance for COVID-19 Testing/Results/Information	\$10,000.00
ROUNDED TOTAL	\$10,000.00

## ATTACHMENT 1 (continued)

A2-FY21 \*To Extend End Date to June 30, 2023 and add ELC-ED Expansion Funds

GRANT BUDGET

(BUDGET PAGE 8)

Nashville Davidson County Health Department - Epidemiology and Laboratory Capacity for Infectious Diseases (ELC), Enhancing Detection				
APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2021, and ending June 30, 2022.				
Object Line-Item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY <sup>1</sup> (detail schedule(s) attached as applicable)	GRANT CONTRACT	GRANTEE MATCH <sup>3</sup>	TOTAL PROJECT
1	Salaries <sup>2</sup>	\$1,202,200.00	\$0.00	\$1,202,200.00
2	Benefits & Taxes	\$483,000.00	\$0.00	\$483,000.00
4, 15	Professional Fee/ Grant & Award <sup>2</sup>	\$1,568,000.00	\$0.00	\$1,568,000.00
5	Supplies	\$1,500,000.00	\$0.00	\$1,500,000.00
6	Telephone	\$116,500.00	\$0.00	\$116,500.00
7	Postage & Shipping	\$100,000.00	\$0.00	\$100,000.00
8	Occupancy	\$0.00	\$0.00	\$0.00
9	Equipment Rental & Maintenance	\$500,000.00	\$0.00	\$500,000.00
10	Printing & Publications	\$950,000.00	\$0.00	\$950,000.00
11, 12	Travel/ Conferences & Meetings <sup>2</sup>	\$100,000.00	\$0.00	\$100,000.00
13	Interest <sup>2</sup>	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals <sup>2</sup>	\$500,000.00	\$0.00	\$500,000.00
17	Depreciation <sup>2</sup>	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel <sup>2</sup>	\$0.00	\$0.00	\$0.00
20	Capital Purchase <sup>2</sup>	\$3,000,000.00	\$0.00	\$3,000,000.00
22	Indirect Cost (% and method)	\$2,100,000.00	\$0.00	\$2,100,000.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	<b>GRAND TOTAL</b>	<b>\$12,119,700.00</b>	<b>\$0.00</b>	<b>\$12,119,700.00</b>

<sup>1</sup> Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A*. (posted on the Internet at: <https://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>).

<sup>2</sup> Applicable detail follows this page if line-item is funded.

<sup>3</sup> A Grantee Match Requirement is detailed by this Grant Budget, and the maximum total amount reimbursable by the State pursuant to this Grant Contract, as detailed by the "Grant Contract" column above, shall be reduced by the amount of any Grantee failure to meet the Match Requirement.



## ATTACHMENT 1 (continued)

A2-FY21 \*To Extend End Date to June 30, 2023 and add ELC-ED Expansion Funds

GRANT BUDGET

(BUDGET PAGE 10)

<b>Nashville Davidson County Health Department - Epidemiology and Laboratory Capacity for Infectious Diseases (ELC), Enhancing Detection</b>				
<b>APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2022, and ending June 30, 2023.</b>				
<b>POLICY 03 Object Line-item Reference</b>	<b>EXPENSE OBJECT LINE-ITEM CATEGORY <sup>1</sup> (detail schedule(s) attached as applicable)</b>	<b>GRANT CONTRACT</b>	<b>GRANTEE MATCH <sup>3</sup></b>	<b>TOTAL PROJECT</b>
1	Salaries <sup>2</sup>	\$1,141,300.00	\$0.00	\$1,141,300.00
2	Benefits & Taxes	\$471,000.00	\$0.00	\$471,000.00
4, 15	Professional Fee/ Grant & Award <sup>2</sup>	\$950,000.00	\$0.00	\$950,000.00
5	Supplies	\$500,000.00	\$0.00	\$500,000.00
6	Telephone	\$95,000.00	\$0.00	\$95,000.00
7	Postage & Shipping	\$500,000.00	\$0.00	\$500,000.00
8	Occupancy	\$0.00	\$0.00	\$0.00
9	Equipment Rental & Maintenance	\$100,000.00	\$0.00	\$100,000.00
10	Printing & Publications	\$500,000.00	\$0.00	\$500,000.00
11, 12	Travel/ Conferences & Meetings <sup>2</sup>	\$100,000.00	\$0.00	\$100,000.00
13	Interest <sup>2</sup>	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals <sup>2</sup>	\$100,000.00	\$0.00	\$100,000.00
17	Depreciation <sup>2</sup>	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel <sup>2</sup>	\$0.00	\$0.00	\$0.00
20	Capital Purchase <sup>2</sup>	\$500,000.00	\$0.00	\$500,000.00
22	Indirect Cost (% and method)	\$991,400.00	\$0.00	\$991,400.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	<b>GRAND TOTAL</b>	<b>\$5,948,700.00</b>	<b>\$0.00</b>	<b>\$5,948,700.00</b>

<sup>1</sup> Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A*. (posted on the Internet at: <https://www.tn.gov/assets/entities/finance/attachments/policy3.pdf>).

<sup>2</sup> Applicable detail follows this page if line-item is funded.

<sup>3</sup> A Grantee Match Requirement is detailed by this Grant Budget, and the maximum total amount reimbursable by the State pursuant to this Grant Contract, as detailed by the "Grant Contract" column above, shall be reduced by the amount of any Grantee failure to meet the Match Requirement.

**ATTACHMENT 1 (continued)**  
**GRANT BUDGET LINE-ITEM DETAIL**  
**(BUDGET PAGE 7)**

<b>SALARIES</b>				<b>AMOUNT</b>
Name, Title	Monthly Salary	# of Months	% of time	
Vacant, Communicable Disease Investigator	\$ 3,480.59	x 12	x 100%	\$41,767.08
Vacant, Communicable Disease Investigator	\$ 3,480.59	x 12	x 100%	\$41,767.08
Vacant, Communicable Disease Investigator	\$ 3,480.59	12	x 100%	\$41,767.08
Vacant, Communicable Disease Investigator	\$ 3,480.59	12	x 100%	\$41,767.08
Vacant, Communicable Disease Investigator	\$ 3,480.59	12	x 100%	\$41,767.08
Vacant, Communicable Disease Investigator	\$ 3,480.59	12	x 100%	\$41,767.08
Vacant, Communicable Disease Investigator	\$ 3,480.59	x 12	x 100%	\$41,767.08
Vacant, Communicable Disease Investigator	\$ 3,480.59	x 12	x 100%	\$41,767.08
Vacant, Communicable Disease Investigator	\$ 3,480.59	x 12	x 100%	\$41,767.08
Vacant, Communicable Disease Investigator	\$ 3,480.59	x 12	x 100%	\$41,767.08
Vacant, Communicable Disease Investigator	\$ 3,480.59	x 12	x 100%	\$41,767.08
Vacant, Manager 2	\$ 6,079.44	x 12	x 100%	\$72,953.30
Vacant Public Health Administratrpr 1	\$ 5,072.49	12	x 100%	\$60,869.82
Vacant Public Health Administratrpr 1	\$ 5,072.49	12	x 100%	\$60,869.82
Vacant Public Health Administratrpr 1	\$ 5,072.49	12	x 100%	\$60,869.82
Vacant Epidemiologist	\$ 6,079.44	12	x 100%	\$72,953.30
Vacant, Epidemiologist	\$ 6,079.44	12	x 100%	\$72,953.30
Vacant, PHN 2	\$ 5,072.49	12	x 100%	\$60,869.82
Vacant, Office Support Representative	\$ 2,926.79	12	x 100%	\$35,121.46
Vacant, Office Support Representative	\$ 2,926.79	12	x 100%	\$35,121.46
Vacant, Office Support Representative	\$ 2,926.79	12	x 100%	\$35,121.46
Vacant, Information Systems Analyst 3	\$ 5,072.49	12	x 100%	\$60,869.82
Dianne Harden, Finance Officer	\$ 9,375.60	12	x 25%	\$28,126.80
Vacant, Finance Officer 2	\$ 4,192.55	12	x 50%	\$25,155.30
<b>ROUNDED TOTAL</b>				<b>\$1,141,293.36</b>

501172	70760.18832
501173	16548.75372
501174	225000
501175	12500
501176	5000
501177	140835.6006
\$	470,644.54

<b>TRAVEL / CONFERENCES &amp; MEETINGS</b>	<b>AMOUNT</b>
Routine Travel	\$100,000.00
<b>ROUNDED TOTAL</b>	<b>\$100,000.00</b>

<b>PROFESSIONAL FEES/MANAGEMENT</b>	<b>AMOUNT</b>
Temporary Staffing	\$900,000.00
Provide Language line assistance for COVID-19 Testing/Results/Information	\$50,000.00
<b>ROUNDED TOTAL</b>	<b>\$950,000.00</b>

<b>SPECIFIC ASSISTANCE TO INDIVIDUALS</b>	<b>AMOUNT</b>
Food/lodging/transportation	\$100,000.00
<b>ROUNDED TOTAL</b>	<b>\$100,000.00</b>

**ATTACHMENT 2****Federal Award Identification Worksheet**

Subrecipient's name (must match registered name in DUNS)	Metropolitan Government of Nashville and Davidson Co
Subrecipient's DUNS number	007827668
Federal Award Identification Number (FAIN)	NU90TP922118
Federal award date	04/23/2020
CFDA number and name	93.323 Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) Enhancing Detection
Grant contract's begin date	03/16/2020
Grant contract's end date	06/30/2022
Amount of federal funds obligated by this grant contract	\$26,000,000.00
Total amount of federal funds obligated to the subrecipient	\$26,000,000.00
Total amount of the federal award to the pass-through entity (Grantor State Agency)	\$393,076,212.00
Name of federal awarding agency	The Centers for Disease Control and Prevention
Name and contact information for the federal awarding official	De'Lisa Simpson, Project Officer Centers for Disease Control & Prevention 1600 Clifton Rd, NE, MS-C18 Atlanta, GA 30329 Telephone: 404-639-3629 Email: <a href="mailto:ion9@cdc.gov">ion9@cdc.gov</a>
Is the federal award for research and development?	No
Indirect cost rate for the federal award (See 2 C.F.R. §200.331 for information on type of indirect cost rate)	14.3% at the time of this contract