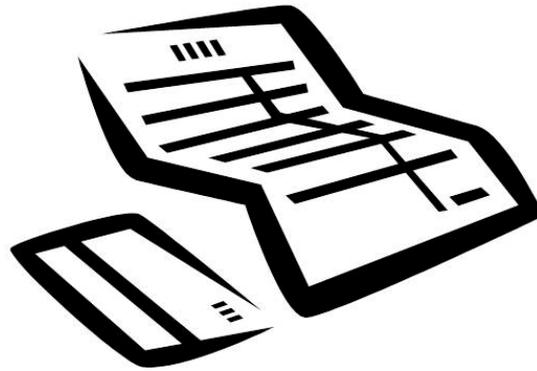


Contract Amendment Process



CDPH/WIC DIVISION

Telephone # 1-877-411-9748
Attendee Access Code # 7492591



Agenda

- Overview
- Documents to Submit
- Submission Process
- Deadlines
- Resources
- Contacts
- Summary

Overview

- Contract Amendment Package
- <http://www.cdph.ca.gov/programs/wicworks/Pages/WI-C-LocalAgencyResources.aspx>
 - General Information
 - Contract Amendment Instructions
 - Budget Plan Instructions
- Attachments

Documents to Submit

Click the links below to access all amendment documents directly from the WIC website:

- [Attachment 1 - Required Documents Checklist](#)
- [Attachment 2 - Certification of Contract Amendment](#)
- [Attachment 3 - Agency Information](#)
- Attachment 4 - Amendment Budget Plan
 - Customized Budget Plan emailed to each local agency on March 18th

Documents to Submit

...Continued

Click the links below to access all amendment documents directly from the WIC website:

- [Attachment 5 - Justification of Staffing Levels](#)
- [Attachment 6 - Request for Authorization to Subcontract](#)
- [Attachment 7 - Certification of Indirect Cost Rate](#)
- [Attachment 8 - Payee Data Record \(STD. 204\)](#)



Required Documents Checklist

Attachment 1

Required Documents Checklist

- This form shall be completed **by all local agencies**.
- Check the box in the Yes column for each document that is included with your Contract Amendment.
- Check the box in the N/A column for each document that is not applicable and therefore is not included with your Contract Amendment.

Certification of Contract Amendment

Attachment 2

Certification of Contract Amendment

- This form shall be completed **by all local agencies.**
- List the name of the individual who can legally bind the agency and certify the contract amendment.
- List the legal name of the local agency.

Agency Information

Attachment 3

Agency Information

- This form shall be completed **by all local agencies.**
- Complete sections A through M.
- For section A, if the legal name has changed, please complete Attachment 8, Payee Data Record.

Questions?



*6 to Unmute

or use the chat

Budget Plan Overview

- In order to amend the Budget Plan, local agencies must complete:
 - Exhibit B, Attachment II - Detail Worksheet
 - Exhibit B, Attachment III - Facility Costs Worksheet
- The CDPH/WIC Division will use the above worksheets to create Exhibit B, Attachment I – Budget.

Budget Plan Overview

...Continued

- Original budget plan information has been copied into individualized Budget Plan worksheets.
- Original budget plan information is locked and cannot be changed.
- Contact your Contract Manager if corrections are needed in the Budget Plan worksheet.



Budget Plan Overview

...Continued

- Cells highlighted in orange and grey are prepopulated, locked and cannot be changed.
- Only cells in white are unlocked and shall be completed by the local agency.
- Do not use formulas when completing the budget plan, as it will delay the execution of your Amendment.



Budget Plan Overview

...Continued

- The following sample is for Year 1 only and matches the sample available on the WIC website.
- The following procedures are the same for Years 2, 3 and 4.



Detail Worksheet

Attachment 4

Personnel Section – Salaries and Wages

For position titles listed in the original contract, fill out column(s):

- Current Base Annual Salary Minimum Amendment A-01*
- Current Base Annual Salary Maximum Amendment A-01*
- FTE Amendment A-01
- Budget Adj.

* changes to salary ranges shall only be done if the changes have been approved by your Parent Agency and posted to your Parent Agency's website (not including non-profit agencies).



Detail Worksheet

Attachment 4

Personnel Section – Salaries and Wages

To list new position titles, fill out the column(s):

- Exhibit A SOW 6.A
- Exhibit A Attachment I
- Current Base Annual Salary Minimum Amendment A-01
- Current Base Annual Salary Maximum Amendment A-01
- FTE Amendment A-01
- Budget Adj.



Detail Worksheet

Attachment 4

Personnel Section – Salaries and Wages

To adjust the amount budgeted for overtime, fill out column(s):

- Budget Adj.



Detail Worksheet

Cells in grey are
prepopulated from
original contract

...Continued

Year 1				
10/1/2015 - 9/30/2016				
Personnel				
Position Title	Exhibit A SOW 6.A	Exhibit A Attachment I	Current Base Annual Salary Minimum	Current Base Annual Salary Minimum Amendment A-01
Administrative Assistant	16, 17, 18, 19,	1-5, 7	26,291	
Assistant Manager	8, 12	1-5, 7	29,480	
Breastfeeding Coordinator	12, 15	8	37,070	
Peer Counselor Supervisor and Lactation Consultant	2, 8, 12	8	37,070	
Peer Counselor	8, 12	8	20,010	
Customer Service Representative	8,12	1, 2, 5	20,010	
Customer Service Specialist	8,12	1, 2, 5	20,010	
Customer Service Lead	8,12	1, 2, 5	23,546	
Data Analyst	8, 9, 12	0	49,171	
Degreed Nutritionist	8,12	1-5	21,341	
Director	1-23	5	58,190	
Finance Associate	8, 12, 13	0	26,291	
Local Vendor Liaison	8, 12	6	26,291	
Marketing & Outreach Manager			46,530	
Nutrition Education Associate			29,480	
Nutrition Education Coordinator			37,070	
Nutrition Education Manager			46,530	
Registered Dietitian	2, 8, 12	1-5	26,291	
Service Area Manager	2, 8, 12	1-5, 7	37,070	
Staff Education Coordinator	2, 7, 8, 10, 12	1-5	37,070	
WIC Nutrition Assistant	8,12	1-5	20,010	
IT Associate	8, 12, 18, 20, 21, 16, 17	0	41,580	-
IT Analyst	8, 12, 18, 20, 21, 16, 17	0	-	42,000

Fill out this column for new
position titles and if there are
approved changes for current
position titles



Detail Worksheet

...Continued

	Year 1			
	10/1/2015 - 9/30/2016			
Personnel				
Position Title	Exhibit A SOW 6.A	Exhibit A Attachment I	Current Base Annual Salary Minimum	Current Base Annual Salary Minimum Amendment A-01
Administrative Assistant	16, 17, 18, 19,	1-5, 7	26,291	
Assistant Manager	8, 12	1-5, 7	29,480	
Breastfeeding Coordinator	12, 15	8	37,070	
Peer Counselor Supervisor and Lactation Consultant	2, 8, 12	8	37,070	
Peer Counselor	8, 12	8	20,010	
Customer Service Representative	8,12	1, 2, 5	20,010	
Customer Service Specialist	8,12	1, 2, 5	20,010	
Customer Service Lead	8,12	1, 2, 5	23,546	
Data Analyst	8, 9, 12	0	49,171	
Degreed Nutritionist	8,12	1-5	21,341	
Director	1-23	5	58,190	
Finance Associate	8, 12, 13	0	26,291	
Local Vendor Liaison	8, 12	6	26,291	
Marketing & Outreach Manager	6,	5	29,480	
<u>Fill out the Exhibit A columns for new position titles</u>	2,			
	2,			
	12, 14	1-5, 7	37,070	
	2, 3, 7, 8, 10, 12, 22	1-5, 7	46,530	
Registered Dietitian	2, 8, 12	1-5	26,291	
Service Area Manager	2, 8, 12	1-5, 7	37,070	
Staff Education Coordinator	2, 7, 8, 10, 12	1-5	37,070	
WIC Nutrition Assistant	8,12	1-5	20,010	
	8, 12, 18, 20, 21, 16, 17	0	41,580	-
IT Associate	8, 12, 18, 20, 21, 16, 17	0	-	42,000
<u>IT Analyst</u>				

Note: New position titles are in bold and underlined



Detail Worksheet

...Continued

Year 1
10/1/2015 - 9/30/2016

Personnel				
Position Title	Current Base Annual Salary Maximum	Current Base Annual Salary Maximum Amendment A-01	FTE	FTE Amendment A-01
Administrative Assistant	55,765		1.00	
Assistant Manager	62,480		4.50	
Breastfeeding Coordinator	78,430		1.00	
Peer Counselor Supervisor and Lac	78,430		1.00	
Peer Counselor	41,246		2.00	
Customer Service Representative	41,246		2.88	
Customer Service Specialist	41,246		3.00	
Customer Service Lead	49,837		1.00	
Data Analyst	55,765		0.50	
Degreed Nutritionist	45,323		11.60	
Director	126,610		1.00	
Finance Associate	55,765		1.00	
Local Vendor Liaison	55,765		1.00	
Marketing & Outreach Manager			1.00	
Nutrition Education Associate			1.00	
Nutrition Education Coordinator			1.00	
Nutrition Education Manager			1.00	
Registered Dietitian			9.13	
Service Area Manager			5.00	
Staff Education Coordinator			1.00	
WIC Nutrition Assistant	41,246		22.00	
IT Associate	88,000	-	1.00	0.00
IT Analyst	-	87,000	0.00	1.00

Fill out this column for new position titles and if there are approved changes for current employees

Fill out this column by entering the new FTEs for position titles listed in your original contract or enter the number of FTEs for new position titles

Detail Worksheet

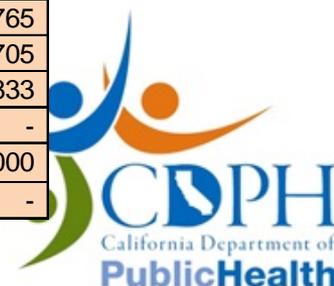
...Continued

Year 1
10/1/2015 - 9/30/2016

Personnel			
Position Title	Budget	Budget Adj.	Budget Amendment A-01
Administrative Assistant	34,464		34,464
Assistant Manager	204,518	500	205,018
Breastfeeding Coordi	58,427		58,427
Peer Counselor Supe	54,479	200	54,679
Peer Counselor	63,336		63,336
Customer Service Re	71,550		71,550
Customer Service Sp	69,236	(3,000)	66,236
Customer Service Le	31,884		31,884
Data Analyst	25,465	300	25,765
Degreed Nutritionist	393,695	100	393,795
Director	94,202	1,000	95,202
Finance Associate	39,469	500	39,969
Local Vendor Liaison	37,075		37,075
Marketing & Outreach Manager	61,868	(100)	61,768
Nutrition Education Asso	47,608	(400)	47,208
Nutrition Education Coord	63,858		63,858
Nutrition Education Mana	62,635		62,635
Registered Dietitian	414,333	2,000	416,333
Service Area Manager	279,765		279,765
Staff Education Coordinator	51,705		51,705
WIC Nutrition Assistant	668,833		668,833
IT Associate	50,554	(50,554)	-
IT Analyst	-	50,000	50,000
Overtime (3)	-		-

Fill out this column to increase or decrease budgeted salaries and to enter in new budgeted salaries for new position titles

Automatically populated to calculate the new budget amount for each position title



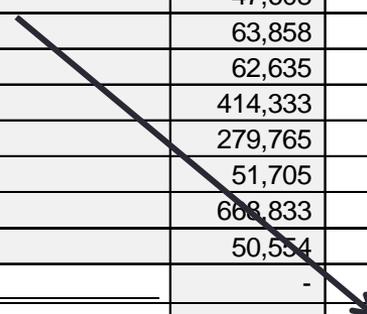
Detail Worksheet

...Continued

Year 1
10/1/2015 - 9/30/2016

Personnel			
Position Title	Budget	Budget Adj.	Budget Amendment A-01
Administrative Assistant	34,464		34,464
Assistant Manager	204,518	500	205,018
Breastfeeding Coordinator	58,427		58,427
Peer Counselor Supervisor and Lactation Consultant	54,479	200	54,679
Peer Counselor	63,336		63,336
Customer Service Representative	71,550		71,550
Customer Service Specialist	69,236	(3,000)	66,236
Customer Service Lead	31,884		31,884
Data Analyst	25,465	300	25,765
Degreed Nutritionist	393,695	100	393,795
Director	94,202	1,000	95,202
Finance Associate	39,469	500	39,969
Local Vendor	37,075		37,075
Marketing & Communications	61,868	(100)	61,768
Nutrition Education Associate	47,608	(400)	47,208
Nutrition Education Coordinator	63,858		63,858
Nutrition Education Manager	62,635		62,635
Registered Dietitian	414,333	2,000	416,333
Service Area Manager	279,765		279,765
Staff Education Coordinator	51,705		51,705
WIC Nutrition Assistant	668,833		668,833
IT Associate	50,554	(50,554)	-
IT Analyst	-	50,000	50,000
Overtime (3)	-		-

Enter the budget adjustment for overtime here



Detail Worksheet

Attachment 4

Fringe Benefits

To change the fringe benefit rate, enter the new rate in the column(s):

- Percentage Amendment A-01
- Local agencies shall provide justification for any amended Fringe Benefit Rate that is 50% or more in any year.
- If a local agency previously had a justification for a Fringe Benefit rate that is 50% or more, then the local agency will not need to resubmit another justification when submitting the Amendment for review, approval and execution.



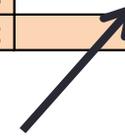
Detail Worksheet

Attachment 4

Year 1
10/1/2015 - 9/30/2016

Fringe Benefits ④	Percentage		Budget	Percentage Amendment A-01	Budget Amendment A-01
	41.00%		1,180,373		1,180,597
Total Personnel			4,059,332		4,060,102

Enter in the new percentage in the white cells



Detail Worksheet

Attachment 4

Operating Expenses

To adjust the amount budgeted for Operating Expenses categories fill out column(s):

- Budget Adj.



Detail Worksheet

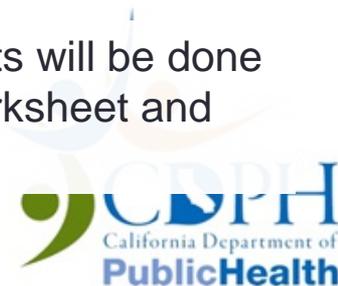
Attachment 4

Year 1
10/1/2015 - 9/30/2016

Operating Expenses	Budget	Budget Adj.	Budget Amendment A-01
Minor Equipment ⑤	10,000		10,000
General Office Expenses	319,374	(38,098)	281,276
Training	32,200		32,200
Travel	20,000		20,000
Professional Services	800		800
Outreach	13,003		13,003
Media/Program Materials	3,680		3,680
Program Materials	1,046		1,046
Vehicle Maintenance⑥	1,000		1,000
Audit			-
Facility Costs (See Exhibit B Attachment III for breakdown) ⑦	695,220	(3,396)	691,824
Total Operating Expenses	1,096,323	(41,494)	1,054,829

Enter in the budget adjustment for Operating Expenses in the white cells

Facility Costs adjustments will be done on the Facility Costs Worksheet and will auto populate here



Detail Worksheet

Attachment 4

Operating Expenses

- Reminder: Items with a per unit cost of \$4,999 or less listed under Major Equipment shall be reclassified as Minor Equipment



Detail Worksheet

Attachment 4

Major Equipment

To adjust the amount budgeted for Major Equipment categories fill out column(s):

- Budget Adj.



Detail Worksheet

Attachment 4

Year 1
10/1/2015 - 9/30/2016

Major Equipment ③ <u>unit cost must be \$5,000 or more</u>		Budget	Budget Adj.	Budget Amendment A-01
Telephone System		-	-	-
Information Technology Equipment		-	-	-
Vehicle (s)		-	-	-
Photocopy Equipment		-	-	-
Total Major Equipment		-	-	-

Enter in the budget adjustment for Major Equipment in the white cells



Detail Worksheet

Attachment 4

Major Equipment

- Reminder: Only items with a per unit cost of \$5,000 or more should be listed in this category.



Questions

*6 to Unmute



or use the chat

Detail Worksheet

Attachment 4

Subcontracts

To adjust the amount budgeted for Subcontracts fill out column(s):

- Budget Adj.



Detail Worksheet

Attachment 4

Year 1
10/1/2015 - 9/30/2016

Subcontracts ⑨	Exhibit A SOW	Exhibit A Attachment I		Budget	Budget Adj.	Budget Amendment A-01
TBD - Web Hosted Messaging Service	1	6		15,000		15,000
TBD - Website Redesign and Maintenance	21			4,000		4,000
				-		-
				-		-

Enter in the budget adjustment for Subcontracts in the white cells



Detail Worksheet

Attachment 4

Subcontracts

- If "TBD" is listed under Subcontracts in your original contract and you now have the name of your subcontractor(s) please submit name and applicable documents to your Contract Manager
- Work with your Contract Manager and submit the applicable documents for any new Subcontractor(s)



Detail Worksheet

Attachment 4

Total Indirect Costs

To change the Total Indirect Costs rate in Year 1, enter the new rate in the column(s):

- Percentage Amendment A-01

* See Budget Instructions for language regarding applicable rules and allowable rates



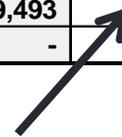
Detail Worksheet

Attachment 4

Year 1
10/1/2015 - 9/30/2016

Total Indirect Costs			Percentage		Budget	Percentage Amendment A-01	Budget Amendment A-01
	% of Total Personnel Costs		16.0000%		649,493	17.0000%	690,217
	% of Total Direct Costs		0.0000%		-		-

Enter in the new percentage in the white cells



* Local agencies are not permitted to change the type of Indirect Cost Rate used



Detail Worksheet

Attachment 4

Total Indirect Costs

- To change the Total Indirect Costs rate for Years 2, 3 and 4 contact your Contract Manager.
- Local agencies may only change the ICR percentage when an amendment for other Business reasons (shifts of money) are initiated. Local agencies are not permitted to only amend the ICR percentage.
 - Applies to all local agencies except in Year 1



Detail Worksheet

Attachment 4

Total Costs		5,824,148	5,824,148
New Budget including increase	→	New Yr. 1 Budget	5,824,148.00
Increase in funding	→	Yr. 1 - Budget Increase	-
		Yr. 1 - Checks/Balances	0

Checks/balances cell must be 0 when submitting your amended budget to your Contract Manager

- If the number here is **(red)**, you entered more money than is in your budget.
- If the number here is **black**, you have NOT entered in all of your budget.



Questions



*6 to Unmute

or use the chat

Facility Cost Worksheet

Attachment 4

Facility Costs

To change site amounts, fill out the column(s):

- Total Cost of Site Per Month Adj.
- Price Per Square Foot Adj.



Facility Cost Worksheet

Attachment 4

Street Address, City, Zip Code	A WIC MIS Clinic Site # or N/A	Type of Space (Clinic Site, Administrative Site, Training Center, Warehouse, Storage Area, satellite clinic site)	Total Square Feet	Total Cost of Per Month	Total Cost of Site Per Month Adj.	Total Cost of Site Per Month Segment A-01
1251 University Ave, Sacramento 95827	001	Clinic Site	3,960	11,617	(500)	11,117
1453 WIC Drive, Natomas 95834	002	Clinic Site	4,412	9,872		9,872
8174 Mountain View, Sacramento 95814	003	Satelite Site	1,271	3,617		3,617

Enter the adjustment for Total Cost
of Site per month



Facility Cost Worksheet

Attachment 4

Street Address, City, Zip Code	Price Per Square Foot	Price Per Square Foot Adj.	New Total Amendment A-01
1251 University Ave, Sacramento 95827	2.93	(0.01)	2.92
1453 WIC Drive, Natomas 95834	2.24	(0.02)	2.22
8174 Mountain View, Sacramento 95814	2.85		2.85

Enter the adjustment for Price Per Square Foot



Facility Cost Worksheet

Attachment 4

Facility Costs

- If you have relocated or closed a site, please work with your Contract Manager to complete the Facility Cost Worksheet



Justification of Staffing Levels

Attachment 5

Justification of Staffing Levels

- This form shall be completed, only if the local agency will be adding a new Position Title to the WIC Personnel Listing.
- Explain how the agency's proposed staffing levels will continue to meet the minimum requirements of the WIC local agency contract and will continue to meet the needs of the Scope of Work.

Request for Authorization to Subcontract

Attachment 6

Request for Authorization to Subcontract

- This form shall be completed, only if the local agency will be adding a new subcontract that exceeds \$2,500 or will be making changes to an existing subcontract that has already been approved.
- If there is a new subcontractor and the name of the subcontractor is unknown, list the subcontractor as "TBD."

Request for Authorization to Subcontract

...Continued – Attachment 6

- The form must be signed in blue ink and must be accompanied with a cover letter including the justification for the need to subcontract, bid documentation, and an unsigned copy of the subcontract.
- The original form must be mailed and emailed to your Contract Manager.

Certification of Indirect Cost Rate

Attachment 7

Certification of Indirect Rate

- This form shall be completed, only if the local agency will be requesting an Indirect Cost Rate (ICR) that is different from the ICR listed in the FFY 2016 – 2019 Contract Application.
- The ICR listed on the Certification of Indirect Cost Rate form must match the rate listed on Exhibit B, Attachment II, Detail Worksheet.

Certification of Indirect Cost Rate

...Continued – Attachment 7

- Local agencies cannot change the ICR from Total Personnel to Total Direct Costs within the contract period.
- A copy of the ICR proposal shall be submitted with the Contract Amendment. Private non-profit local agencies that wish to obtain an approved ICR from their cognizant agency, may submit the plan to WIC for assistance with obtaining an approved ICR.

Payee Data Record, STD. 204

Attachment 8

Payee Data Record, STD. 204

- This form shall be completed, only if the local agency's legal name has changed since the local agency submitted the FFY 2016 – 2019 Contract Application.
- The form must be signed in blue ink and the original must be emailed and mailed to the Contract Manager.

Submission Process

- All of the contract amendment attachments, 1 through 8, shall be emailed to your Contract Manager.
- The following forms shall be signed and the originals shall be mailed to your Contract Manager:

Attachment 6 – Request for Authorization to
Subcontract (*if applicable*)

Attachment 8 – Payee Data Record (*if applicable*)

Submission Process

...Continued

Forms requiring signature shall be mailed to your Contract Manager at:

California Department of Public Health
Women, Infants, and Children Division
Attn: **Contract Manager Name**
3901 Lennane Drive, MS 8600
Sacramento, CA 95834



Deadlines

- Local agencies are required to submit the completed Contract Amendment Package no later than May 1st, 2016.
- Local agencies are encouraged to submit a draft Budget Plan before May 1st, so that the final Budget Plan may be reviewed and approved quickly.
- If the budget plan is disputed, local agencies must submit a new budget plan within 5 calendar days.

Resources

Click the links below to access all amendment documents directly from the WIC website:

- [Attachment 1 - Required Documents Checklist](#)
- [Attachment 2 - Certification of Contract Amendment](#)
- [Attachment 3 - Agency Information](#)
- [Attachment 4 - Amendment Budget Plan Sample](#)

Resources

...Continued

Click the links below to access all amendment documents directly from the WIC website:

- [Attachment 5 - Justification of Staffing Levels](#)
- [Attachment 6 - Request for Authorization to Subcontract](#)
- [Attachment 7 - Certification of Indirect Cost Rate](#)
- [Attachment 8 - Payee Data Record \(STD. 204\)](#)

Resources

...Continued

Click the links below to access all amendment documents directly from the WIC website:

- [PWPC #03-18-16-022](#)
- [Allowable Costs](#)
- [Frequently Asked Questions](#)
- [2016 – 2019 Caseload and Funding](#)



Contacts

Any questions, concerns or changes concerning the Amendment should be directed to:

1. Frequently Asked Questions
2. Contract Manager
3. Contract Manager's Supervisor

A contact list for Contract Manager's and their Supervisors can be found on the WIC website [HERE](#)

Summary

- Overview
- Documents to Submit
- Submission Process
- Deadlines
- Resources
- Contacts

Questions



*6 to Unmute

or use the chat