



TOMÁS J. ARAGÓN, MD, DrPH  
Director and State Public Health Officer

State of California—Health and Human Services Agency  
California Department of Public Health



GAVIN NEWSOM  
Governor

## ACCEPTANCE OF AWARD

### County of Kings

**Agreement Number:** 24-STI08

**Allocation Amount:** \$607,664.00

**Allocation Funding Period:** July 1, 2024, through June 30, 2026

I hereby accept this allocation. By accepting this allocation, I agree to the requirements as described in the [2024 - 2026 STI Prevention and Collaboration Allocation Reference Guide](#) and any other conditions stipulated by the California Department of Public Health, Sexually Transmitted Diseases Control Branch.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

APPROVED AS TO FORM  
Diane Freeman, County Counsel

By:   
Willie Barrera, Deputy County Counsel





TOMÁS J. ARAGÓN, MD, DrPH  
Director and State Public Health Officer

# State of California—Health and Human Services Agency California Department of Public Health



GAVIN NEWSOM  
Governor

## Allocation Letter

January 24, 2024

TO: ELIGIBLE CALIFORNIA LOCAL HEALTH JURISDICTIONS (LHJs)

SUBJECT: STI PREVENTION AND COLLABORATION ALLOCATIONS

The California Department of Public Health (CDPH), Sexually Transmitted Diseases Control Branch (STDCB) is pleased to announce the intent to award state general funds to LHJs to support sexually transmitted infection (STI) prevention and control activities. These allocations are for a full two years and set to begin on July 01, 2024 and end on June 30, 2026.

This allocation combines the previous STD Core and STD Prevention and Collaboration allocations authorized by [California Health and Safety Code \(H&SC\) Section 120511](#). The funds must be used for the implementation of public health activities related to monitoring, prevention, testing, and linkage to and retention in care activities for the most vulnerable and underserved individuals living with, or at high risk for, STIs in collaboration with community-based organizations (CBOs) providing services within the LHJ. For the purposes of this grant, STIs are defined as chlamydia, gonorrhea, syphilis, congenital syphilis, and mpox. Activities may include integrated services for STIs, viral hepatitis, human immunodeficiency virus (HIV) infection, and drug overdose, to the extent they improve health outcomes for people living with, or at risk for, STIs.

A portion of funds allocated to LHJs shall be provided to, or used to support activities in partnership with, CBOs or nonprofit health care providers, provided that there are CBOs or nonprofit health care providers in the jurisdiction that can conduct the activities and provide these services consistent with [H&SC 120511](#).

A summary of the funding allocation process, including the final annual allocation amounts for the LHJs and detail on the CBO amount by jurisdiction, webinar recordings, Reference Guide and frequently asked questions (FAQs) are available at: [STI/HCV Local Assistance Funding](#) SharePoint.



LHJs will be required to prepare and submit a workplan for each year along with a program budget available at: [STI/HCV Local Assistance Funding](#) SharePoint. LHJs will indicate in their workplans and program budgets the activities they plan to conduct during the given budget period, including which budget items will support CBOs. LHJs will also be required to submit data and reporting according to the table below.

Frequency	Report Deadlines	Report Recipient
Semi-Annual (Narrative summary reports and quantitative data tables)	February 15 <sup>th</sup>  August 15 <sup>th</sup>	<a href="mailto:STDLHJContracts@cdph.ca.gov">STDLHJContracts@cdph.ca.gov</a>
Ongoing (STI Case Closure)	Ongoing, within 45 days of report to the LHJ	CalREDIE or other CDPH-developed data system, or by other means per agreement between the local STD Control Officer and the STDCB.

LHJs must adhere to the workplan activities, and any subsequent revisions, along with all instructions included in the STI Prevention and Collaboration Reference Guide, policy memoranda, or directives issued by CDPH-STDCB. CDPH-STDCB will make any changes and/or additions to these guidelines in writing and, whenever possible, notification of such changes shall be made 30 days prior to implementation.

In order to receive these funds, the LHJ must return the following documents no later than close of business, **March 29, 2024** via email to [STDLHJContracts@cdph.ca.gov](mailto:STDLHJContracts@cdph.ca.gov) with a cc to [Adriana.Cervantes@cdph.ca.gov](mailto:Adriana.Cervantes@cdph.ca.gov).

- Include the name of your local jurisdiction in the subject line to help us easily identify which LHJ you represent (***County of XXXX – STI Prevention and Collaboration Allocation***).
1. **LHJ Program Contact Information**
  2. **Acceptance of Award**
  3. **Annual Workplan for FY 2024-2025\***
    - a. Complete the workplan in [Qualtrics](#).
  4. **Budget for Fiscal Year (FY) 2024-2025\***
    - a. Download the budget template from the [STI/HCV Local Assistance Funding](#) SharePoint site.

*\*Note: The workplan and budget for FY 2025-2026 will be due by March 3, 2025.*

The STI Prevention and Collaboration Allocations webinar has been scheduled for **January 25, 2024 from 1:00 pm to 2:30 pm**. During the webinar, STDCB will provide an overview of the funding including background, goals of the funding, local health jurisdiction funding allocation information, workplan activities, and anticipated timeline. The presentation will be followed by a question and answer period. Please forward this invitation to other staff in your jurisdiction that should participate. This meeting will be recorded for those unable to attend.

If you have any questions, please feel free to email your Regional Capacity Building Coordinator with a cc to Jasmin Delgado ([Jasmin.Delgado@cdph.ca.gov](mailto:Jasmin.Delgado@cdph.ca.gov)) and Adriana Cervantes ([Adriana.Cervantes@cdph.ca.gov](mailto:Adriana.Cervantes@cdph.ca.gov)).

Sincerely,



Alexia McGonagle, Chief  
Business Operations Support Section  
STD Control Branch

cc: Kathleen Jacobson, MD, Chief, STD Control Branch  
Karlo Estacio, Assistant Branch Chief, STD Control Branch  
Rachel Piper, Chief, Contracts and Purchasing Unit  
Adriana Cervantes, Local Assistance Funding Specialist  
Jessica Frasure-Williams, Chief, Program Development Section  
Jasmin Delgado, Chief, Local Capacity Building Unit  
Cary Escovedo, Bay Area Regional Capacity Building Coordinator  
Danelle Del Rincon, Southern California Regional Capacity Building Coordinator  
Emily Gordis, Central Inland Regional Capacity Building Coordinator  
Ryan Martin-Valenzuela, Northern Regional Capacity Building Coordinator

**STD CONTROL BRANCH  
LOCAL HEALTH JURISDICTION CONTACT INFORMATION**

<b>ORGANIZATION</b>	This is the information that will appear on your allocation cover page.		
	Federal Tax Identification Number	_____	
	Legal Name of the Organization	_____	
	Mailing Address	_____	
	Street Address (If Different)	_____	
	County	_____	
	Telephone Number	_____	Fax Number

<b>ACCEPTANCE OF AWARD LETTER SIGNATORY</b>	The Acceptance of Award Letter Signatory is the individual who has the authority to sign and accept the funds.			
	Name	_____		
	Title	_____		
	Mailing Address	_____		
	Street Address (If Different)	_____		
	Telephone Number	_____	Fax Number	_____
	Email	_____		

<b>AWARD REPRESENTATIVE</b>	The Award Representative is the individual who is responsible for the oversight of the award and is responsible for the day-to-day activities of the award and for seeing that all award requirements are met. This person will be in contact with State STD Control Branch staff and will receive all programmatic, budget, and accounting documents for the award and will be responsible for the proper dissemination of program information.			
	Name	_____		
	Title	_____		
	Mailing Address	_____		
	Street Address (If Different)	_____		
	Telephone Number	_____	Fax Number	_____
	Email	_____		

**AWARD DIRECTOR**

The Award Director is the individual who has overall authority of this grant and will be the second point of contact after the Award Representative.

Name \_\_\_\_\_

Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street Address (If Different) \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Email \_\_\_\_\_

**CASHIER/FISCAL REPRESENTATIVE**

The Cashier/Fiscal Representative is the individual who is responsible for submitting invoices and receiving the invoice payments. The remittance address is where the payments will be mailed.

Name \_\_\_\_\_

Title \_\_\_\_\_

Remittance Address \_\_\_\_\_

Street Address (If Different) \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Email \_\_\_\_\_

**California Department of Public Health (CDPH)  
Sexually Transmitted Diseases Control Branch  
(STDCB)**

**Sexually Transmitted Infection (STI) Prevention  
and Collaboration Allocations**

**Reference Guide**

2024 - 2026

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## **Part 1- Allocation Process**

### **Overview**

This document is intended to serve as a reference guide for Sexually Transmitted Infection (STI) Prevention and Collaboration allocations. All information, documents, and templates referred to in this document can be found on the [STI/Hepatitis C Virus \(HCV\) Local Assistance Funding](#) SharePoint. Please find relevant programmatic guidance documents on the [CDPH STDCB](#) website.

The STI Prevention and Collaboration allocations are intended for the implementation of public health activities related to monitoring, prevention, testing, and linkage to and retention in care activities for the most vulnerable and underserved individuals living with, or at high risk for, STIs in collaboration with community-based organizations (CBOs) providing services within the local health jurisdiction (LHJ).

For the purposes of this funding, STIs are defined as chlamydia, gonorrhea, syphilis, congenital syphilis, and mpox. Upon CDPH approval, other communicable diseases transmitted by sexual contact may be included as allowable activities.

A CBO is a public or private nonprofit organization that provides services to individuals in the community, including Federally Qualified Health Centers (FQHC), FQHC Look-Alikes, Rural Health Clinics, and drug treatment programs. Correctional health organizations are considered a CBO as long as they are a nonprofit entity. A nonprofit entity is a tax-exempt organization under Section 501(c)3 of the Internal Revenue Code. LHJs wishing to reach priority populations served by for-profit entities (e.g., some jail health companies or community colleges) can participate in activities that include, for example, partnering with a nonprofit CBO to support STI testing and treatment in those settings.

Effective July 1, 2024, the CDPH STDCB will combine the following funding sources into a single allocation:

- **STD Prevention & Collaboration Allocations (\$13.6 million ongoing)**
  - \$4.5 million, appropriated in FY 2019-20
  - \$3.6 million, appropriated in FY 2021-22
  - \$5.5 million, appropriated in 2022-23
  
- **STD Core Allocations (\$3.6 million ongoing)**
  - Base funding with current funding formula established in FY 2018-19

## Authority

Per the California [Health and Safety Code Section 120511](#) (H&SC 120511), the department shall allocate funds to LHJs for sexually transmitted disease prevention and control activities. The department shall develop measures for each local health jurisdiction funded pursuant to this section to demonstrate accountability. The local health department has the authority for STI prevention and control as outlined in the [Summary of Regulations Related to STD Prevention and Control Efforts in California](#).

## Allocations of Local Assistance Funds

The full memo outlining STI LHJ Allocations for Fiscal Year 2024-25 and 2025-26 is available on the [STI/HCV Local Assistance Funding](#) SharePoint. CDPH met with the Executive Committees of the County Health Executives Association of California (CHEAC) and California Conference of Local Health Officers (CCLHO) in September 2023 to determine funding plans for the next budget cycle beginning July 1, 2024.

The following decisions were made:

- To reduce administrative burden, the STD Prevention and Collaboration and STD Core allocations will be combined and renamed the STI Prevention and Collaboration Allocations beginning FY 2024-2025.
- Based on the agreement between CDPH, CCLHO, and CHEAC, funding formulas for both the STD Prevention & Collaboration Allocations (methodology established FY 2021-22) and STD Core Allocations (methodology established FY 2018-2019) will remain unchanged.
- All LHJs will receive the same funding amount for both the STD Core and STD Prevention and Collaboration as they have in the current FY, as shown in the table below. This includes base funding of \$250,000 for recipients of the STD Collaboration allocation. LHJs receiving only the STD Core allocation will not receive the \$250,000 base (i.e., Berkeley, Pasadena, Santa Cruz, Yolo).
- Per the authorizing statute ([H&SC 120511](#)), no less than fifty percent of STD Prevention and Collaboration awards must be provided to community-based organizations (CBOs) through direct funding or in-kind support. This requirement does not apply to the STD Core component of the combined STI Prevention and Collaboration awards.
- CDPH will revisit statewide allocations for FY 2026-2027 to adjust for increasing syphilis and congenital syphilis cases, and present to CHEAC and CCLHO Executive Committees for input and approval.
- If additional State General Fund is allocated through the state budget process, CDPH will work with CHEAC and CCLHO Executive Committees to determine funding approaches, including whether additional LHJs may be funded utilizing the combined methodology.

## Timeline and Award Process

<b>Date</b>	<b>Award Process</b>
January 24, 2024	STDCB will send Allocation Letters to the LHJs along with other agreement documents.
January 25, 2024	STDCB will host an STI Prevention and Collaboration Allocations webinar.
March 29, 2024	LHJs will return the signed Acceptance of Award and requested documents to the STDCB for review and approval.
April 01, 2024 – May 31, 2024	STDCB will review the annual workplans and budgets submitted by the LHJs.
June 03, 2024 – June 28, 2024	STDCB will send the Award Letters to the LHJs along with the approved workplan, budget, and Electronic Invoice Template (EIT).

As an official acknowledgement of receipt of the Allocation Letter, the Acceptance of Award must be returned to CDPH STDCB with an authorized signature. By signing the Acceptance of Award, the recipient agrees to all the conditions of the award as set forth by STDCB. A signed agreement is a prerequisite for reimbursement of invoices. The following certification forms are also included in the Allocation Letter email and should be sent with the signed Acceptance of Award:

- LHJ Program Contact Information
- Annual Workplan for 2024-2025\*
- Budget for Fiscal Years 2024-2025\*

*\*Note: The workplan and budget for FY 2025-2026 will be due by March 3, 2025.*

## **Part 2 - STI Prevention and Collaboration Activities**

### **Annual Workplan**

The STI Prevention and Collaboration workplan is available on the [STI/HCV Local Assistance Funding](#) SharePoint and will be submitted to CDPH STDCB via electronic survey. The STI Prevention and Collaboration workplan reflects the allowable activities for the STI Prevention and Collaboration allocations. Chosen activities should be based on funding allocated to each LHJ as well as local needs, capacity, and infrastructure. The workplan will include confirmation of which activities the LHJ will conduct during that fiscal year and a description of how each activity will be implemented by the LHJ or CBOs. LHJs may propose and describe other innovative and impactful activities for approval by CDPH STDCB throughout the allocation award period. All program activities, including innovative projects, should support the goals described in California [H&SC 120511](#).

### **Guide to Non-Allowable and Allowable Use of Funds**

The Guide to Non-Allowable and Allowable and Allowable Use of Funds is available on the [STI/HCV Local Assistance Funding](#) SharePoint. All expenses must be for activities consistent with the purpose of the allocations award and reflected in the LHJ's workplan. Please submit questions to [STDLHJContracts@cdph.ca.gov](mailto:STDLHJContracts@cdph.ca.gov) with a cc to your Regional Capacity Building Coordinator (RCBC) & Local Assistance Funding Specialist (LAFS).

#### **1. Incentives and Material Support**

Funds may be used for incentives and material support, with supportive justification, tracking, and reporting of outcomes. Detailed instructions and tracking logs are available on the [STI/HCV Local Assistance Funding](#) SharePoint. There is no prepayment for incentives or materials support. The LHJ will only be reimbursed for the total cost of incentives and material support distributed during each quarter. Current CDPH approvals require the Behavior Modification Material (BMM) to be justified with scientific proof of behavior change, and be accompanied by a justification, incentive tracking log, and reporting of incentive distribution.

**a. Reporting Use of Incentives.** Acceptable incentives include items such as low value gift cards (e.g., Walmart, Safeway, transportation vouchers), and/or other STI-related incentives. The value of the incentive is limited to \$50.00 of merchandise per person per intervention. All proposals for incentives must be submitted to CDPH STDCB for review prior to purchase and project implementation, accompanying information must contain justification for use as BMM, defined amount, targeted distribution plan, tracking, and reporting logs. When using incentives to achieve the goals and objectives outlined in the workplan, the LHJ must adhere to the following requirements:

- Complete a Distribution and Tracking Log available at: [STI/HCV Local Assistance Funding](#) SharePoint.

- Keep the Distribution and Tracking Log within a secure study file.
- This log will contain the date purchased, product name, product type, quantity, product number, denomination, total cost, recipient information, reason for distribution and date distributed.
- Participation incentives cannot be used for the purchase of alcohol, tobacco, or drug products.
- A copy of the Distribution and Tracking Log must be submitted with the quarterly invoice. The Distribution and Tracking Log must be kept for a minimum of five (5) years after the termination of the agreement.

**b. Reporting Use of Material Support.** Acceptable material support includes, but it is not limited to, sleeping bags, tarps, shelter, clothing items, and hygiene kits. All proposals for material support items must be submitted to CDPH STDCB for review prior to purchase and implementation, and accompanying information must contain justification for use, defined amount, targeted distribution plan, tracking, and reporting logs. When using material support items to achieve the goals and objectives outlined in the work plan, the LHJ must adhere to the following requirements:

- Complete a Distribution and Tracking Log available at: [STI/HCV Local Assistance Funding](#) SharePoint.
- Keep the Distribution and Tracking Log within a secure study file.
- This log will contain the date purchased, product name, product type, quantity, product number, denomination, total cost, recipient information, reason for distribution and date distributed.
- A copy of the Distribution and Tracking Log must be submitted with the quarterly invoice.
- The Distribution and Tracking Log must be kept for a minimum of five (5) years after the termination of the agreement.

**2. Vehicles/Mobile Testing Units.** If the LHJ uses the STI Prevention and Collaboration funding for the purchase, lease, or other operational and maintenance support of mobile testing units, the following conditions apply:

- The LHJ shall only use said vehicles for the performance of activities under the terms of this allocation.
- The LHJ agrees that all operators of motor vehicles reimbursed by CDPH under the terms of this agreement shall hold a valid State of California driver's license. If ten or more passengers are to be transported in any one vehicle, the operator shall also hold a State of California Class B driver's license.
- If any motor vehicle costs are reimbursed by CDPH under the terms of this agreement, the LHJ, as applicable, shall provide, maintain, and certify that, at a minimum, the following type and amount of automobile liability insurance is in effect during the term of this allocation or any extension period during which any vehicle remains in the LHJ's possession:

- The LHJ must possess or obtain automobile liability insurance in the amount of \$1,000,000 per occurrence for bodily injury and property damage combined. Said insurance must be obtained and made effective upon the delivery date of any motor vehicle reimbursed with these funds.
- The LHJ shall furnish a copy of the certificate of insurance to the CDPH STDCB within thirty (30) days of purchasing the motor vehicle.
- The LHJ agrees that bodily injury and property damage liability insurance, as required herein, shall remain in effect at all times during the term of this agreement and any extension period.
- The LHJ agrees to provide CDPH STDCB at least thirty (30) days prior to the expiration date of said insurance coverage a copy of a new certificate of insurance evidencing continued coverage, as indicated herein for not less than the remainder of the term of this allocation, the term of any extension or continuation thereof, or for a period of not less than one (1) year.

### **Part 3 - Budget and Budget Revisions**

The CDPH STDCB Budget Template and instructions are available on the [STI/HCV Local Assistance Funding](#) SharePoint.

#### **1. Budget Preparation Process**

- STDCB will send an email to LHJs containing the Allocation Letter, workplan, and budget template.
- LHJs must submit a complete workplan and budget by the established deadline stated in the Allocation Letter to the LAFS prior to activities being conducted. Activities being conducted without prior budget approval may not be eligible for reimbursement payment.
- LHJs must complete the fiscal year (FY) 2024-2025 and FY 2025-2026 budget tabs.
- LHJs must fill out the LHJ name, allocation award number, name and FY.
- LHJs must fill out the budget categories for each FY. The budget categories are Personnel, Operating Expenses, Major Equipment, Travel, Subcontractors, Other Costs, Indirect Cost Rate (ICR), and Budget Grand Total.
- A portion of the STI Prevention and Collaboration funds allocated to LHJs shall be provided to, or used to support activities in partnership with, CBOs or nonprofit health care providers. The required minimum is indicated in the award letter and funding memo on the [STI/HCV Local Assistance Funding](#) SharePoint. If in-kind support is provided to CBOs and/or nonprofit health care providers, LHJs must check the corresponding box in column I in the Budget Template. Once the box is checked, this will auto populate into the Total Amount Allocated to the CBO calculation table at the bottom of the page. The Subcontractor line item is divided into two parts:
  - The Subcontractor I is for any agreement with 501(c)3 nonprofit community-based organizations and nonprofit health care providers.
  - Subcontractor II is for any agreement with non 501(c)3 organizations to conduct one or more of the activities for the LHJ or CBO.
  - Select the type of organization and subcontractor selection method from the drop-down menu.
  - The subcontractor budget template included in the budget template document should be completed for each subcontractor in Subcontractor I and Subcontractor II.
- The Total Cost column requires no action. This column will auto populate once the information is provided.

- The Total Amount Allocated to the LHJ and CBO table requires no action. These cells will auto populate once the information is provided.

## 2. Budget Submission and Approval Process

- LAFS will review the budget and may contact LHJs with questions or requests for budget corrections within a two-week review period. The budgets will be reviewed in the order received.
- Upon approval, the LAFS will send an email to the LHJs with the approved budget and Electronic Invoice Template (EIT) for the FY.

## 3. Invoice Submission Process

- LHJs must submit their invoices no more than forty-five (45) calendar days after the end of each quarter unless a later or alternate deadline is agreed to in writing by the LAFS.
- Completed and signed invoices must be sent via email to [STDLHJInvoices@cdph.ca.gov](mailto:STDLHJInvoices@cdph.ca.gov) with a cc to the LAFS by the due dates outlined below:

Quarter	Budget Revision Requests Deadline (<\$10,000)	Budget Revision Requests Deadline (>\$10,000)	Invoice Due Date
Q1: July 01 - September 30	NA	Ongoing; 30 days prior to purchase and implementation.	November 15th
Q2: October 01 - December 31	NA	Ongoing; 30 days prior to purchase and implementation.	February 15th
Q3: January 01 - March 31	NA	Ongoing; 30 days prior to purchase and implementation.	May 15th
Q4: April 01 - June 30	June 15th	Ongoing; 30 days prior to purchase and implementation.	August 15th

## 4. Budget Revision Request and Approval Process

- LHJs must submit a formal budget revision request if a new line item is added or for a budget shift of more than \$10,000.
- LHJs must send the budget revision request to the LAFS for review and approval prior to purchase and implementation.
- Budget revision(s) that do not include the addition of a new line item or a budget shift of more than \$10,000 do not require a formal budget revision submission until two months prior (June 15th) to the Q4 invoice due date (August 15th).



- **IMPORTANT** - A new line item is defined as something that has not been previously reviewed and approved by the LAFS. LHJs must consult with the LAFS prior to entering into contracts and procurements for services that exceed an established dollar amount (e.g., marketing, public outreach campaigns, promotional media, advertising, major equipment) or shifting funds into these line items. Refer to the Guide to Non-Allowable and Allowable Use of Funds available on the [STI/HCV Local Assistance Funding](#) SharePoint for specific and established dollar amounts.
- LHJs must follow the steps outlined below to submit their budget revision requests.
  - LHJs must send a request for a budget revision via email to [STDLHJContracts@cdph.ca.gov](mailto:STDLHJContracts@cdph.ca.gov) with a cc to the LAFS.
  - LAFS will provide the LHJs with the budget revision template.
  - LHJs will update the budget revision template tab to reflect the new budget information by changing the text color from black (outdated) to red and **bold** (updated).
  - A written justification is required when submitting a budget revision. The justification must be included in a cell note as to why the funds are being added/deleted/shifted. The description of expense section must also be updated to reflect the new changes.
  - LHJs must send the budget revision back via email to [STDLHJContracts@cdph.ca.gov](mailto:STDLHJContracts@cdph.ca.gov) with a cc to the LAFS.
- LAFS will review the budget revision and provide final approval no later than two weeks after the budget revision is received.
- LAFS will send an email to the LHJs with the approved budget and revised EIT once the review is complete.

## **Part 4 - Standards and Procedures**

### **Budget Detail and Payment Provisions**

#### **1. Invoicing and Payment**

- Upon completion of activities as indicated in the workplan, and upon receipt and approval of the invoices, CDPH agrees to reimburse the LHJ for activities performed and expenditures incurred in accordance with the total amount of this agreement.
- Invoices shall include the agreement number and shall be submitted electronically not more frequently than quarterly in arrears to [STDLHJInvoices@cdph.ca.gov](mailto:STDLHJInvoices@cdph.ca.gov) with a cc to your LAFS.
- Invoices must be prepared on the electronic invoice template provided by CDPH and must be signed by an authorized official, employee or agent certifying that the expenditures claimed represent activities performed and are in accordance with the workplan.
- Invoices must bear the LHJ's official name.
- Invoices must identify the billing and/or performance period covered by the invoice.
- Invoices must itemize costs as indicated by the Electronic Invoice Template instructions. Subject to the terms of this allocation, reimbursement may only be sought for those costs and/or cost categories expressly identified as allowable and approved by CDPH.
- Invoices must be submitted no more than forty-five (45) calendar days after the end of each quarter unless a later or alternate deadline is agreed to in writing by the LAFS.

#### **2. Budget Contingency Clause**

- It is mutually agreed that if the Budget Act of the current year and/or any subsequent years covered under this agreement does not appropriate sufficient funds for the program, this agreement shall be of no further force and effect. In this event, CDPH shall have no liability to pay any funds whatsoever to the LHJ or to furnish any other considerations under this agreement and LHJ shall not be obligated to fulfill any provisions of this agreement.
- If funding for any fiscal year is reduced or deleted by the Budget Act for purposes of this program, CDPH shall have the option to either cancel this agreement with no liability occurring to CDPH or offer an agreement amendment to the LHJ to reflect the reduced amount.

### **3. Prompt Payment Clause**

- Payment will be made in accordance with, and within the time specified in, Government Code Chapter 4.5, commencing with Section 927.

### **4. Timely Submission of Final Invoice**

- A final undisputed invoice shall be submitted for payment no more than forty-five (45) calendar days following the expiration or termination date of this agreement, unless a later or alternate deadline is agreed to in writing by the LAFS. Said invoice should be clearly marked “Final Invoice”, indicating that all payment obligations of CDPH under this agreement have ceased and that no further payments are due or outstanding.

### **5. Travel and Per Diem Reimbursement**

- Any reimbursement for necessary travel and meal and incidental rates shall, unless otherwise specified in this agreement, be at the rates currently in effect, as established by the California Department of Human Resources ([Cal HR](#)) for in state travel and U.S General Services Administration ([GSA](#)) for out of state travel. If the Cal HR or GSA rates change during the term of the agreement, the new rates shall apply upon their effective date and no amendment to this agreement shall be necessary. No travel outside California shall be reimbursed without prior authorization from the CDPH. Verbal authorization should be confirmed in writing. Written authorization may be in a form including email confirmation.
- The total budget amount for out-of-state travel shall not exceed five (5) percent of the total annual budget of this agreement.

### **6. Use of Funds/Supplanting**

- These funds shall be used to supplement and enhance existing local STI program activities and services and shall not supplant local funding. These funds shall not replace existing services and activities, prevent the addition of new services and activities, and shall not be used to duplicate reimbursement of costs and services received from local funds or other sources. Supplanting of funds is defined (for the purposes of this agreement) as using local assistance award monies to “replace” or “take the place of” existing local funding. For example, reductions in local funds cannot be offset by the use of any CDPH STDCB dollars for the same purpose.

## 7. Method of Selection for Subcontractors

- The LHJ must ensure the use of a competitive bid process in the selection of all subcontracts. If the subcontract is one where the LHJ has a current agreement, indicate the date the agreement was effective. If the CBO is a non-profit agency as defined by Internal Revenue Code 501(c)3, ensure the LHJ has a current determination letter on file from the Internal Revenue Service for the CBO.
- If it is determined that no CBOs existing within the LHJ meet the criteria specified in [H&SC Section 120511](#) for subcontracts or in-kind support, then the LHJ shall submit written documentation demonstrating this fact to CDPH STDCB, which CDPH STDCB will review on a case-by-case basis.

## 8. Proper Use of Funds

- All proposals must be submitted to [STDLHJContracts@cdph.ca.gov](mailto:STDLHJContracts@cdph.ca.gov) with a cc to your LAFS for review prior to purchase and implementation. Refer to the Guide to Non-Allowable and Allowable Use of Funds available on the [STI/HCV Local Assistance Funding](#) SharePoint.

## 9. Case, Laboratory, and Interview Record Reporting Requirements

- All LHJs shall comply with reporting requirements for reportable STIs identified in [Title 17, California Code of Regulations \(CCR\) §2500, §2593, §2641.5-2643.20, and §2800 – 20182 Reportable Diseases and Conditions](#).
- All LHJs, must enter STI case reports, laboratory results, and other data as appropriate for their jurisdiction directly into the California Reportable Disease Information Exchange (CalREDIE), California CONFidential Network for Contact Tracing (CalCONNECT), or other CDPH developed system, or by other agreement between the local STD Control Officer and the STDCB. Submission of hard copy forms for data entry into CalREDIE by CDPH or electronic scanned copies of case reports, laboratory results, or interview records into the electronic filing cabinet (EFC) without entering data into the appropriate fields will not be accepted. CDPH STDCB will provide essential minimum necessary elements for data entry on STI case report forms. These include but are not limited to:
  - Syphilis laboratory tests and confidential morbidity reports (CMR) should be processed and assigned for investigation according to best practice as established by the [California Syphilis Reactor Alert System \(SRAS\)](#) or other local preference.
  - Syphilis and congenital syphilis case investigations are to be reported according to updated CDPH STDCB protocols on the appropriate case report forms; samples of these forms are available on the [CDPH website](#). LHJs will complete and close investigations in CalREDIE within 45 days of initial report to local health department.

- Chlamydia and gonorrhea reports are automatically triaged and processed in CalREDIE per electronic laboratory report data. Additional follow up for CT and GC infections is done at local discretion.
- Cases of gonorrhea with suspected treatment failure, high minimum inhibitory concentrations (MIC) to CDC-recommended treatment or disseminated gonococcal infection (DGI) should be reported to CDPH STDCB within 24 hours of initial report to local health department. Reports should be conveyed by calling the CDPH STDCB Office at (510) 620-3400. See [Follow-Up Guidelines For Patients With Suspected Gonorrhea Treatment Failure and Reduced Susceptibility to Specific Antibiotics](#) and [DGI Guidance for Local Health Departments](#) for more details.
- Mpox laboratory reports and CMR should be triaged and assigned for investigation according to the [MPOX case and cluster investigation protocol for local health departments](#).
- Suspected or confirmed cases of chancroid should be reported to CDPH STDCB within 24 hours of initial report to local health department. Reports should be conveyed by calling the CDPH STDCB Office at (510) 620-3400.
- LHJs will participate in STI-specific CalREDIE and CalCONNECT trainings and conduct quality control procedures, including review of cases to ensure appropriate surveillance case definition and reconciliation of case counts to ensure optimal and effective interventions to prevent subsequent STI spread.
- For STI-related surveillance and reporting inquiries, please email [STDCalREDIE@cdph.ca.gov](mailto:STDCalREDIE@cdph.ca.gov).
- For STI case definitions, please visit [STI Case Definitions](#).
- For frequently asked questions, manuals/guidelines, and forms/instructions related to CalREDIE, please visit [STD Control Branch - CalREDIE Resources](#) or the CalREDIE [document repository](#) (restricted access to CalREDIE users).
- All fax reporting to CDPH is strongly discouraged.

## 10. Data Security and Confidentiality

- LHJs shall comply with recommendations set forth in CDC's [Data Security and Confidentiality Guidelines for HIV, Viral Hepatitis, Sexually Transmitted Disease, and Tuberculosis Programs](#).
- LHJs shall have staff complete CDPH-required confidentiality and data security training, including the HIV Surveillance Security and Confidentiality Training (email [CDPHOASurveillanceQualityManagementUnit@cdph.ca.gov](mailto:CDPHOASurveillanceQualityManagementUnit@cdph.ca.gov) for the current training link). Maintain files with associated confidentiality agreements for each staff person with access to STI/HIV/HCV data.

## 11. Outbreak Reporting

- The California Code of Regulations (Title 17, Section 2502[c]) directs local health officers to immediately report unusual disease occurrences or outbreaks to CDPH. STI outbreak reports (including mpox) should be conveyed by calling the CDPH STDCB Office at (510) 620-3400.

## 12. Financial Expenditures and Reporting

- LHJs must maintain records reflecting actual expenditures. Please refer to the Guide to Non-Allowable and Allowable Use of Funds available on the [STI/HCV Local Assistance Funding](#) SharePoint. The CDPH STDCB reserves the right to question and re-negotiate reimbursement for any expenditure that may appear to exceed a reasonable cost for the service. Financial expenditures/reporting are required and must be submitted within 45 calendar days after the end of each quarter. Annual financial expenditures and reporting should be submitted no later than 45 days after the end of the budget period. Invoices should be sent to [STDLHJInvoices@cdph.ca.gov](mailto:STDLHJInvoices@cdph.ca.gov).

## 13. Performance Progress Reporting

- LHJs will be required to submit data and reporting according to the table below.

Frequency	Report Deadlines	Report Recipient
Semi-Annual (Narrative summary reports and quantitative data tables)	February 15 <sup>th</sup> August 15 <sup>th</sup>	<a href="mailto:STDLHJContracts@cdph.ca.gov">STDLHJContracts@cdph.ca.gov</a>
Ongoing (STI Case Closure)	Ongoing, within 45 days of report to the LHJ	CalREDIE, CalCONNECT or other CDPH-developed data system, or by other means per agreement between the local STD Control Officer and the STDCB.

- All publications and manuscripts published as a result of the work supported in part or whole by these funds must be submitted with the performance progress reports. Additionally, health advisories, health education materials, and other products should be submitted.

#### **14. Rights of CDPH STDCB**

- CDPH STDCB reserves the right to modify the terms and conditions of all awards. Additional information and documentation may be required.
- CDPH STDCB reserves the right to use and reproduce all reports and data produced and delivered pursuant to the local assistance awards and reserves the right to authorize others to use or reproduce such materials, provided that the confidentiality of patient information and records is protected pursuant to California State laws and regulations.

**Tab Name**[Instructions](#)[Awards for Combined STI Prevention and  
Collaboration Funding \(FY 24/25 - FY 25/26\)](#)[Summary Budget](#)[FY 2024-2025](#)[FY 2025-2026](#)[Subcontractor Budget](#)



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### Tab Description

This tab contains information on the budget preparation and submission process. This tab tells  
This tab includes the current STD Core funding, STD Prevention and Collaboration funding,  
total combined STI Prevention and Collaboration funding and total amount LHJs must use to  
The summary budget tab will tabulate budget category costs across multiple fiscal years (FY)  
This tab includes a blank budget template for the fiscal year 2024-2025.  
This tab includes a blank budget template for the fiscal year 2025-2026.  
The subcontractor budget tab includes a blank budget template for LHJs to include their

**STEP-BY-STEP BUDGET AND BUDGET REVISION INSTRUCTIONS**

**STEP 1 - Budget Preparation Process**

- STDCB will send an email to LHJs containing the Allocation Letter, workplan, and budget template.
- LHJs must submit a complete workplan and budget by the established deadline stated in the Allocation Letter to the Local Assistance Funding Specialist (LAFS) prior to activities being conducted. Activities being conducted without prior budget approval may not be eligible for reimbursement payment.
- LHJs must complete the fiscal year (FY) 2024-2025 and FY 2025-2026 budget tabs.
- LHJs must fill out the LHJ name, allocation award number, name and FY.
- LHJs must fill out the budget categories for each FY. The budget categories are Personnel, Operating Expenses, Major Equipment, Travel, Subcontractors, Other Costs, Indirect Cost Rate (ICR), and Budget Grand Total.
  - ◆ [The Guide to Non-Allowable and Allowable Use of Funds is available at: STI/HCV Local Assistance Funding SharePoint.](#)
  - ◆ No less than 50% of the STI Prevention and Collaboration funds allocated to LHJs shall be provided to, or used to support activities in partnership with, CBOs or nonprofit health care providers. If in-kind support is provided to CBOs and/or nonprofit health care providers, LHJs must check the box accordingly in column I. Once the box is checked, this will auto populate into the Total Amount Allocated to the CBO calculation table at the bottom of the page. The Subcontractor line item is divided into two parts:
    - The Subcontractor I is for any agreement with 501c3 nonprofit community-based organizations and nonprofit health care providers. Subcontractor II is for any agreement with non 501c3 organizations to conduct one or more of the activities for the LHJ or CBO. Select the type of organization and subcontractor selection method from the drop-down menu. The subcontractor budget template included in the budget template document should be completed for each subcontractor in Subcontractor I and Subcontractor II.
  - ◆ The Total Cost column requires no action. This column will auto populate once the information is provided.
  - ◆ The Total Amount Allocated to the LHJ and CBO table requires no action. These cells will auto populate once the information is provided.
- LHJs must send a complete workplan and budget via email to [STDLHJContracts@cdph.ca.gov](mailto:STDLHJContracts@cdph.ca.gov) with a cc to the LAFS by the established deadline stated in the Allocation Letter.

**STEP 2 - Budget Submission and Approval Process**

- LAFS will review the budget and may contact the LHJs with questions or requests for budget corrections within a two-week review period. The budgets will be reviewed in the order received.
- Upon approval, the LAFS will send an email to the LHJs with the approved budget and Electronic Invoice Template (EIT) for the FY.

**STEP 3 - Invoice Submission Process**

- LHJs must submit their invoices no more than forty-five (45) calendar days after the end of each quarter unless a later or alternate deadline is agreed to in writing by the LAFS.
- Completed and signed invoices must be sent via email to [STDLHJInvoices@cdph.ca.gov](mailto:STDLHJInvoices@cdph.ca.gov) with a cc to the LAFS by the due dates outlined below:

Quarter	Budget Revision Requests Deadline (<\$10,000)	Budget Revision Requests Deadline (>\$10,000)	Invoice Due Date
Q1: July 01 - September 30	NA	Ongoing; 30 days prior to purchase and implementation.	November 15th
Q2: October 01 - December 31	NA	Ongoing; 30 days prior to purchase and implementation.	February 15th
Q3: January 01 - March 31	NA	Ongoing; 30 days prior to purchase and implementation.	May 15th
Q4: April 01 - June 30	June 15th	Ongoing; 30 days prior to purchase and implementation.	August 15th

**STEP 4 - Budget Revision Request and Approval Process**

- LHJs must submit a formal budget revision request if a new line item is added or a budget shift of more than \$10,000. LHJs must send the budget revision request to the LAFS for review and approval prior to purchase and implementation. Budget revision(s) that do not include the addition of a new line item or a budget shift of more than \$10,000 do not require a formal budget revision submission until two months prior (June 15th) to the Q4 invoice due date (August 15th). LHJs must follow the steps outlined below to submit their budget revision requests.
  - **IMPORTANT - A new line item is defined as something that has not been previously reviewed and approved by the LAFS. LHJs must consult with the LAFS prior to entering into contracts and procurements for services that exceed an established dollar amount (e.g., marketing, public outreach campaigns, promotional media, advertising, major equipment, etc.) or shifting funds into these line items. Refer to the Guide to Non-Allowable and Allowable Use of Funds is available at: STI/HCV Local Assistance Funding SharePoint.**
- LHJs must send a request for a budget revision via email to [STDLHJContracts@cdph.ca.gov](mailto:STDLHJContracts@cdph.ca.gov) with a cc to the LAFS.
- LAFS will provide LHJs with the budget revision template.
- LHJs will update the budget revision template tab to reflect the new budget information by changing the text color from black (outdated) to red and **bold** (updated). A written justification is required when submitting a budget revision. The justification must be included in a cell note as to why the funds are being added/deleted/shifted. The description of expense section must also be updated to reflect the new changes.
- LHJs must send the budget revision via email to [STDLHJContracts@cdph.ca.gov](mailto:STDLHJContracts@cdph.ca.gov) with a cc to the LAFS.
- LAFS will review the budget revision and provide final approval no later than two weeks after the budget revision is received.
- LAFS will send an email to the LHJs with the approved budget and revised EIT once the review is complete.

	Local Health Jurisdiction	Current STD Core Funding	Current STD Prevention and Collaboration Funding*
1	Alameda HD**	\$ 125,603	\$ 473,756
2	Berkeley	\$ 13,625	\$ -
3	Butte	\$ 23,782	\$ 282,054
4	Contra Costa	\$ 79,724	\$ 412,808
5	Fresno	\$ 252,182	\$ 459,883
6	Imperial	\$ 16,777	\$ 294,165
7	Kern	\$ 211,352	\$ 432,802
8	Kings	\$ 23,929	\$ 279,903
9	Long Beach	\$ 91,010	\$ 338,746
10	Los Angeles HD**	\$ 547,050	\$ 1,952,013
11	Madera	\$ 38,784	\$ 281,584
12	Merced	\$ 32,874	\$ 305,549
13	Monterey	\$ 29,721	\$ 330,038
14	Orange	\$ 231,622	\$ 721,828
15	Pasadena	\$ 13,541	\$ -
16	Placer**	\$ 13,565	\$ 297,834
17	Riverside	\$ 210,326	\$ 664,594
18	Sacramento	\$ 161,204	\$ 493,538
19	San Bernardino	\$ 246,335	\$ 646,194
20	San Diego	\$ 323,689	\$ 758,630
21	San Francisco	\$ 268,666	\$ 369,754
22	San Joaquin	\$ 165,234	\$ 383,446
23	San Mateo	\$ 43,740	\$ 350,560
24	Santa Barbara	\$ 32,237	\$ 325,622
25	Santa Clara	\$ 147,955	\$ 502,002
26	Santa Cruz	\$ 20,539	\$ -
27	Shasta	\$ 17,346	\$ 275,240
28	Solano	\$ 37,066	\$ 316,360
29	Sonoma	\$ 35,715	\$ 316,397
30	Stanislaus	\$ 80,093	\$ 345,114
31	Tulare	\$ 45,509	\$ 349,311
32	Ventura	\$ 49,684	\$ 377,195
33	Yolo	\$ 16,521	\$ -
34	Yuba	\$ -	\$ 263,080
	<b>Total</b>	<b>\$ 3,647,000</b>	<b>\$ 13,600,000</b>

\*50% of LHJ STD Prevention & Collaboration funds must support CBOs via direct funding

\*\*HD=health department. Alameda HD excludes Berkeley. Los Angeles HD excludes Pas

<b>Total Combined STI Prevention and Collaboration Grant (Beginning FY 24/25)</b>	<b>Total Amount LHJs Must Use to Support CBOs*</b>
\$ 599,359	\$ 236,878
\$ 13,625	\$ -
\$ 305,836	\$ 141,027
\$ 492,532	\$ 206,404
\$ 712,065	\$ 229,942
\$ 310,942	\$ 147,083
\$ 644,154	\$ 216,401
\$ 303,832	\$ 139,952
\$ 429,756	\$ 169,373
\$ 2,499,063	\$ 976,007
\$ 320,368	\$ 140,792
\$ 338,423	\$ 152,775
\$ 359,759	\$ 165,019
\$ 953,450	\$ 360,914
\$ 13,541	\$ -
\$ 311,399	\$ 148,917
\$ 874,920	\$ 332,297
\$ 654,742	\$ 246,769
\$ 892,529	\$ 323,097
\$ 1,082,319	\$ 379,315
\$ 638,420	\$ 184,877
\$ 548,680	\$ 191,723
\$ 394,300	\$ 175,280
\$ 357,859	\$ 162,811
\$ 649,957	\$ 251,001
\$ 20,539	\$ -
\$ 292,586	\$ 137,620
\$ 353,426	\$ 158,180
\$ 352,112	\$ 158,199
\$ 425,207	\$ 172,557
\$ 394,820	\$ 174,656
\$ 426,879	\$ 188,598
\$ 16,521	\$ -
\$ 263,080	\$ 131,540
<b>\$ 17,247,000</b>	<b>\$ 6,800,000</b>

or in-kind support.

adena and Long Beach.