



TEXAS
Health and Human
Services

Texas Department of State Health Services

John Hellerstedt, M.D.
Commissioner

The Honorable Chris Hill
Collin County Judge
825 N. McDonald Street, Suite 130
McKinney, Texas 75069

Subject: Coronavirus 2019 (COVID-19)
 Contract Number: HHS000769800001, Amendment 4
 Contract Amount: \$1,357,355.00
 Contract Term: April 21, 2020 through March 15, 2023

Dear Judge Hill:

Enclosed is the Public Health Emergency Preparedness Coronavirus 2019 (COVID-19) contract between the Department of State Health Services and Collin County.

The purpose of this amendment is to add a no-cost extension, to allow for continued support of the Coronavirus 2019 (COVID-19) response and in alignment with the Public Health Crisis Response Cooperative Agreement for Emergency Response from the Centers for Disease Control and Prevention (CDC) in support of public health emergency preparedness.

Please let me know if you have any questions or need additional information.

Sincerely,

Jennifer Boggs, CTCM
Contract Manager
512-776-3967
Jennifer.Boggs@dshs.texas.gov

**DEPARTMENT OF STATE HEALTH SERVICES
CONTRACT NO. HHS000769800001
AMENDMENT NO. 4**

The Department of State Health Services (System Agency) and Collin County (Grantee), collectively the Parties to that certain contract for activities in support of Coronavirus 2019 (COVID-19) response and in alignment with the Public Health Crisis Response Cooperative Agreement for Emergency Response effective April 21, 2020 and denominated DSHS Contract No. HHS000769800001 (the Contract), now elect to amend the Contract.

Whereas, the Parties have elected to extend the term of the Contract in accordance with Contract Section III, Contract Period and Renewal, to allow for continued support of COVID-19 response activities.

The Parties agree as follows:

1. Section III of the Contract, Contract Period and Renewal, is hereby amended to reflect a revised termination date of March 15, 2023.
2. This Amendment shall be effective on March 16, 2022.
3. Except as modified by this Amendment, all terms and conditions of the Contract, as amended, shall remain in effect.
4. Any further revisions to the Contract shall be by written agreement of the Parties.

Signature Page follows

**SIGNATURE PAGE FOR AMENDMENT NO. 4
SYSTEM AGENCY CONTRACT NO. HHS000769800001**

DEPARTMENT OF STATE HEALTH SERVICES COLLIN COUNTY

By: _____

By: _____

Name: _____

Name: _____

Title: _____

Title: _____

Date of Signature: _____

Date of Signature: _____

Certificate Of Completion

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Helen Whittington helen.whittington@dshs.texas.gov Security Level: Email, Account Authentication (None)		
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Kirk Cole Kirk.Cole@dshs.texas.gov Security Level: Email, Account Authentication (None)		
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Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

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You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: alison.joffrion@hhsc.state.tx.us

To advise DSHS Contract Management Section of your new email address

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at alison.joffrion@hhsc.state.tx.us and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

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To request paper copies from DSHS Contract Management Section

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to alison.joffrion@hhsc.state.tx.us and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

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To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

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