
MDPP ADMINISTRATIVE AGREEMENT – GUILFORD COUNTY

1. PURPOSE

The Division of Public Health allocated Minority Diabetes Prevention Program (MDPP) funding to Region 5 for the purpose of establishing an evidenced-based diabetes prevention program targeting minority populations within the nine (9) county region due to evidence showing significant diabetes concerns in minority populations.

The goals of the MDPP funding are to: 1) implement a prediabetes and diabetes prevention awareness and marketing campaign in minority communities, 2) provide community screening for prediabetes and referrals to diabetes prevention lifestyle classes and diabetes self-management programs, and 3) offer CDC Lifestyle classes “Prevent T2” and its Spanish-language equivalent to minority communities.

The purpose of this Agreement is for the parties to develop and maintain a relationship which will allow each party to engage in the Minority Diabetes Prevention Program (MDPP) funding. The parties hereby agree to jointly enter into this Agreement for the administrative coordination and financial support for the implementation of MDPP. Alamance County, a government entity and political subdivision of the State of North Carolina, through its Health Department, will act as an Administrator and will serve as a MDPP participant and fiscal agent, respectively, for Region 5 County Health Departments in regards to MDPP. Guilford County, a government entity and political subdivision of the State of North Carolina, through its Health Department coordinate the MDPP program within Guilford County, North Carolina.

2. **SERVICES** - The services to be provided begin June 1, 2025 and continue until May 31, 2026. All services must be provided in a professional, competent and workmanlike manner.

Alamance County is responsible for the following:

- a. Serve as the fiduciary agent for MDPP Region 5 funding including budgeting funds and working with local health directors to establish allocations to local health departments and/or community organizations.
- b. Submit plans, reports, and budget to the NC Department of Health and Human Services contact.
- c. Identify an internal lead to oversee the MDPP program and the requirements in Exhibit A, Contract between NCDHHS, Office of Health Equity and County of Alamance, and Alamance County Health Department, Contract Number 00049314, attached and incorporated herein.
- a. Contract for a Regional Coordinator to implement the deliverables as detailed in Exhibit A.
- b. Lead the regional collaborative via the Regional Coordinator and internal lead.
- c. Execute all other major duties as defined by the lead agency in Exhibit A.

Guilford County, through its Health Department, is responsible for the following:

- a. Designate a contact to serve as liaison for the MDPP program.
- b. Administer the MDPP program in coordination with the Alamance County Minority Diabetes Prevention Program Regional Coordinator and in accordance with Exhibit A.
- c. Identify staff and/or community partner(s) to be trained as coach(es).
 - i. Newly trained staff must submit a copy of documentation training to the Regional Coordinator.
 - ii. Newly identified coaches must participate in weekly coaching calls with the Regional Coordinator.
- d. Participate in a minimum of 50% of the regional collaborative meetings.
- e. Work with the Regional Coordinator to coordinate at least one community screening event.
- f. Implement and provide lifestyle coaching classes for referred individuals.

- i. Coaches must fulfill the requirements as outlined in Exhibit A.
 - ii. Classes must be implemented with accurate monitoring of participants.
 - iii. Participating counties will be placed on a Plan for Improvement if identified as not complying with the model as determined by the Regional Coordinator, Lead Health Director and/or Division of Public Health Program Coordinator. The plan must include strategies for success and expected outcomes for improvement period. Failure to comply may result in the loss of funds.
3. **BUDGET** - Region 5 will receive \$195,105 through the MDPP funding beginning June 1, 2025 and ending May 31, 2026. Funds will be distributed within Region 5 according to Exhibit A. Guilford County will initially receive \$11,643 to implement the MDPP program in the community.

Guilford County must prepare an allocation expenditure budget by December 31, 2025 for the next fiscal year, in the event the State awards additional funding. Acceptable expenditures for the allocation to Guilford County must meet the requirements set out in Exhibit A.

Guilford County is responsible for purchase of all items included in the submitted budget. Guilford County must follow and abide by state and local laws, and fiscal accounting policies and maintain records of expenditures in the event of an audit. Any changes to the budget require advanced written approval from the Alamance County Health Department's Minority Diabetes Prevention Program Regional Coordinator.

4. **SPACE/LOCATION** – Alamance County Health Department will provide space for the lead agency liaison and appropriate space for regional coordinator, as needed. Each local agency is responsible for providing or coordinating space, as needed, to identify lifestyle coaches in their counties.
5. **ASSURANCE** – All parties agree to follow all federal, state and local employment laws to assure the appropriate treatment of staff hired with approved funds provided for under this Agreement.
6. **TERM AND TERMINATION** – The term of the Agreement is from June 01, 2025 to May 31, 2026. Either party may terminate their participation in this Agreement for any reason and without penalty upon thirty (30) days written notice to the other party.
7. **AMENDMENT** - The terms of this Agreement may only be modified or amended with a written amendment executed by parties.
8. **NOTICES** – Written notices must be sent, certified mail, return receipt requested, postage prepaid as follows:

GUILFORD COUNTY HEALTH DEPARTMENT

Victor Isler, Guilford County Manager
P.O. Box 3427 (zip code 27402)
301 West Market Street
Greensboro, NC 27401

ALAMANCE COUNTY HEALTH DEPARTMENT Attention:

Janna Elliott, Assistant Director of Operations
319 N Graham Hopedale Rd., Suite B
Burlington, NC 27217

9. **INDEPENDENT CONTRACTOR** – The parties shall operate as independent contractors for all purposes. Without waiving sovereign immunity, the parties agree to each be solely responsible for their own acts or omissions in the performance of each of their individual duties hereunder and shall be financially and legally responsible for all damages proximately caused by their individual acts or omissions.
10. **WAIVER** - No party's failure to insist on enforcement of any rights under this Agreement at any time or for any period of time shall be deemed waiver of those rights. The waiver by any party of a breach of any provision hereof shall not operate or be construed as a waiver of any subsequent breach.
11. **HEADINGS** - The headings set forth are for convenience only and shall not in any way affect the substance of any provisions contained in this Agreement.
12. **SEVERABILITY** - The provisions in this Agreement are independent of and separable from each other, and no provision shall be affected or rendered invalid or unenforceable by virtue of the fact that for any reason any other provision or other provisions may be invalid or unenforceable in whole or in part.
13. **GOVERNING LAW AND VENUE** – This Agreement shall be governed by the laws of the State of North Carolina.
14. **ENTIRE CONTRACT** - This Agreement, including Exhibit A, sets forth the entire Agreement between the parties with respect to the subject matter hereof. All prior conversations or agreements, whether written or oral among the parties hereto or their representatives are merged within and extinguished. Except as provided herein, no modification hereof shall be binding upon the parties unless the same is in writing and signed by all.

IN WITNESS WHEREOF, the parties have set their hands and seals as of the day and year written above.

GUILFORD COUNTY ON BEHALF OF THE
GUILFORD COUNTY DEPARTMENT OF
HEALTH AND HUMAN SERVICES -
DIVISION OF PUBLIC HEALTH

ATTEST

Natalie Craver,
Assistant Guilford County Manager

Robin B. Keller
Clerk to the Board

ALAMANCE COUNTY HEALTH DEPT

Tony LoGiudice

Tony LoGiudice, Health Director

This instrument has been pre-audited in the manner required
by the Local Government Budget and Fiscal Control Act.

Jennifer Blalock

Jennifer Blalock (Oct 13, 2025 14:07:16 EDT)

Susan Evans, Finance Officer
Alamance County
1105054-463054

Approved as to form.

Debra Bechtel

Debra Bechtel (Oct 13, 2025 14:30:27 EDT)

Debra Bechtel, Special Counsel
Alamance County

GENERAL CONTRACT COVER

This contract is hereby entered into by and between the North Carolina Department of Health and Human Services, Central Management and Support - Office of Health Equity (the "Division") and County of Alamance, a government entity and political subdivision through its health department (the "Contractor") (referred to collectively as the "Parties").

1. Contract Documents:

This contract consists of the following documents, which are incorporated herein by reference:

- (a) This contract cover
- (b) The General Terms and Conditions
- (c) Scope of Work
- (d) Performance Measures Chart
- (e) The Line Item Budget
- (f) State Certification

Incorporated By Reference

The following documents are reference materials and are available by going to the following website, [Open Window](https://openwindow.ncdhhs.gov/index.aspx?pid=doc_ReferenceDocuments) (https://openwindow.ncdhhs.gov/index.aspx?pid=doc_ReferenceDocuments).

- (a) Travel: Policies Governing Travel Related Expenses for Contractors
- (b) General Statutes G.S. 143C6 NonState Entities Receiving State Funds
- (c) Subchapter 03M Uniform Administration of State Grants

These documents constitute the entire agreement between the Parties and supersede all prior oral or written statements or agreements.

2. Precedence Among Contract Documents:

In the event of a conflict between or among the terms of the Contract Documents, the terms in the Contract Document with the highest relative precedence shall prevail. The order of precedence shall be the order of documents as listed in the contract document section, with the first-listed document having the highest precedence and the last-listed document having the lowest precedence. If there are multiple contract amendments, the most recent amendment shall have the highest precedence and the oldest amendment shall have the lowest precedence.

3. Effective Period:

This contract shall be effective on 6/1/2025 and shall terminate on 5/31/2026, with the option to extend, if mutually agreed upon, through a written amendment as provided for in the General Terms and Conditions.

4. Contractor's Duties:

The Contractor shall provide the services as described in the scope of work and in accordance with the approved budget.

5. Division's Duties:

The Division shall pay the Contractor in the manner and in the amounts specified in the contract documents. The total amount paid by the Division to the Contractor under this contract shall not exceed \$195,105. This amount consists of \$195,105 in State funds, \$0 in Local funds, \$0 in Other funds and \$0 in Federal funds.

The total contract amount is \$195,105.

Acct	Budget/Fund	AMU/RCC	Year	Federal	State	County/ Local	Other
	132011 / 1262	2004179	2026	\$0.00	\$195,105.00	\$0.00	\$0.00
	132011 / 1262	2004179	2025	\$0.00	\$0.00	\$0.00	\$0.00

6. Conflict of Interest Policy:

The division has determined that this contract is not subject to N.C.G.S. 143C-6-22 & 23.

7. Reversion of Unexpended Funds:

Any unexpended grant funds shall revert to the Division upon termination of this contract.

8. Reporting Requirements:

The Division has determined this is a contract for financial assistance with a Public Entity. Local governmental agencies are subject to N.C.G.S § 159-34, annual independent audit rules and regulations, OMB Uniform Guidance 2 CFR Part 200, and N.C.G.S. § 143C-6-22, use of state funds by non state entities. If subgranting is allowable, a nongovernmental subgrantee is subject to the reporting requirements described in Uniform Administration of State Awards of Financial Assistance at 09 NCAC 03M.0205.

9. Payment Provisions:

Payment shall be made in accordance with the contract documents as described in the scope of work.

10. Contract Administrators:

All notices permitted or required to be given by one Party to the other and all questions about the contract from one Party to the other shall be addressed and delivered to the other Party's contract administrator. The name, post office address, street address, telephone number, fax number, and email address of the Parties' respective initial contract administrators are set out below. Either Party may change the name, post office address, street address, telephone number, fax number, or email address of its contract administrator by giving timely written notice to the other Party.

For the Division:

IF DELIVERED BY US POSTAL SERVICE	IF DELIVERED BY ANY OTHER MEANS
Tatiana Moore, Program Manager Central Management and Support - Office of Health Equity 5605 Six Forks Road Raleigh, NC 27609 Telephone : ()-- Fax: ()-- Email: tatiana.moore@dhhs.nc.gov	Tatiana Moore, Program Manager Central Management and Support - Office of Health Equity 5605 Six Forks Road Raleigh, NC 27609

For the Contractor:

IF DELIVERED BY US POSTAL SERVICE	IF DELIVERED BY ANY OTHER MEANS
Emanuel Barrera, Minority Diabetes Prevention Program Regional Coordinator Alamance County Health Department 319 N Graham Hopedale Rd B Burlington, NC 27217 Telephone: (336)-639-4284 Fax: ()-- Email:	Emanuel Barrera, Minority Diabetes Prevention Program Regional Coordinator Alamance County Health Department 319 N Graham Hopedale Rd B Burlington, NC 27217

emanuel.barrera@alamancecountync.gov	
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11. Supplementation of Expenditure of Public Funds:

The Contractor assures that funds received pursuant to this contract shall be used only to supplement, not to supplant, the total amount of federal, state and local public funds that the Contractor otherwise expends for contract services and related programs. Funds received under this contract shall be used to provide additional public funding for such services; the funds shall not be used to reduce the Contractor's total expenditure of other public funds for such services.

12. Disbursements:

As a condition of this contract, the Contractor acknowledges and agrees to make disbursements in accordance with the following requirements:

- (a) Implement adequate internal controls over disbursements;
- (b) Pre-audit all vouchers presented for payment to determine:
 - Validity and accuracy of payment
 - Payment due date
 - Adequacy of documentation supporting payment
 - Legality of disbursement
- (c) Assure adequate control of signature stamps/plates;
- (d) Assure adequate control of negotiable instruments; and
- (e) Implement procedures to ensure that account balance is solvent and reconcile the account monthly.

13. Outsourcing to Other Countries:

The Contractor certifies that it has identified to the Division all jobs related to the contract that have been outsourced to other countries, if any. The Contractor further agrees that it will not outsource any such jobs during the term of this contract without providing notice to the Division.

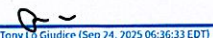
14. Signature Warranty:

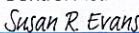
The undersigned represent and warrant that they are authorized to bind their principals to the terms of this Agreement.

Signatures follow on next page

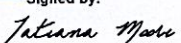
In Witness Whereof, the Contractor and the Division have executed this contract in duplicate originals, with one original being retained by each party.

County of Alamance, Alamance County Health Department

 Tony LoGuidice (Sep 24, 2025 06:36:33 EDT) Signature	09/24/2025 Date
Tony LoGuidice Printed Name	Public Health Director Title

This instrument has been pre-audited in the manner required by the Local Government Budget and Fiscal Control Act.  Susan R. Evans (Sep 23, 2025 19:25:43 EDT) Susan Evans, Finance Director Alamance County	Approved as to form.  Debra Bechtel (Sep 24, 2025 06:17:57 EDT) Debra Bechtel, Special Counsel Alamance County
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Central Management and Support - Office of Health Equity, North Carolina Department of Health and Human Services

Signed by:  55B90DECAD3A457 Authorized Signature	9/24/2025 Date
Tatiana Moore Printed Name	NC MDPP Program Manager Title

GENERAL TERMS AND CONDITIONS**Relationships of the Parties**

Independent Contractor: The Contractor is and shall be deemed to be an independent contractor in the performance of this contract and as such shall be wholly responsible for the work to be performed and for the supervision of its employees. The Contractor represents that it has, or shall secure at its own expense, all personnel required in performing the services under this agreement. Such employees shall not be employees of, or have any individual contractual relationship with, the Division.

Subcontracting: The Contractor shall not subcontract any of the work contemplated under this contract without prior written approval from the Division. Any approved subcontract shall be subject to all conditions of this contract. Only the subcontractors specified in the contract documents are to be considered approved upon award of the contract. The Division shall not be obligated to pay for any work performed by any unapproved subcontractor. The Contractor shall be responsible for the performance of all of its subcontractors.

Assignment: No assignment of the Contractor's obligations or the Contractor's right to receive payment hereunder shall be permitted. However, upon written request approved by the issuing purchasing authority, the State may: (a) Forward the Contractor's payment check directly to any person or entity designated by the Contractor, or (b) Include any person or entity designated by Contractor as a joint payee on the Contractor's payment check. In no event shall such approval and action obligate the State to anyone other than the Contractor and the Contractor shall remain responsible for fulfillment of all contract obligations.

Beneficiaries: Except as herein specifically provided otherwise, this contract shall inure to the benefit of and be binding upon the parties hereto and their respective successors. It is expressly understood and agreed that the enforcement of the terms and conditions of this contract, and all rights of action relating to such enforcement, shall be strictly reserved to the Division and the named Contractor. Nothing contained in this document shall give or allow any claim or right of action whatsoever by any other third person. It is the express intention of the Division and Contractor that any such person or entity, other than the Division or the Contractor, receiving services or benefits under this contract shall be deemed an incidental beneficiary only.

Termination Without Cause: The Division may terminate this contract without cause by giving 30 days written notice to the Contractor.

Termination for Cause: If, through any cause, the Contractor shall fail to fulfill its obligations under this contract in a timely and proper manner, the Division shall have the right to terminate this contract by giving written notice to the Contractor and specifying the effective date thereof. In that event, all finished or unfinished deliverable items prepared by the Contractor under this contract shall, at the option of the Division, become its property and the Contractor shall be entitled to receive just and equitable compensation for any satisfactory work completed on such materials, minus any payment or compensation previously made. Notwithstanding the foregoing provision, the Contractor shall not be relieved of liability to the Division for damages sustained by the Division by virtue of the Contractor's breach of this agreement, and the Division may withhold any payment due the Contractor for the purpose of setoff until such time as the exact amount of damages due the Division from such breach can be determined. In case of default by the Contractor, without limiting any other remedies for breach available to it, the Division may procure the contract services from other sources and hold the Contractor responsible for any excess cost occasioned thereby. The filing of a petition for bankruptcy by the Contractor shall be an act of default under this contract.

Waiver of Default: Waiver by the Division of any default or breach in compliance with the terms of this contract by the Contractor shall not be deemed a waiver of any subsequent default or breach and shall not be construed to be modification of the terms of this contract unless stated to be such in writing, signed by an authorized representative of the Department and the Contractor and attached to the contract.

Availability of Funds: The parties to this contract agree and understand that the payment of the sums specified in this contract is dependent and contingent upon and subject to the appropriation, allocation, and availability of funds for this purpose to the Division.

Force Majeure: Neither party shall be deemed to be in default of its obligations hereunder if and so long as it is prevented from performing such obligations by any act of war, hostile foreign action, nuclear explosion, riot, strikes, civil insurrection, pandemic, earthquake, hurricane, tornado, or other catastrophic natural event or act of God.

Survival of Promises: All promises, requirements, terms, conditions, provisions, representations, guarantees, and

warranties contained herein shall survive the contract expiration or termination date unless specifically provided otherwise herein, or unless superseded by applicable Federal or State statutes of limitation.

Intellectual Property Rights

Copyrights and Ownership of Deliverables: All deliverable items produced pursuant to this contract are the exclusive property of the Division. The Contractor shall not assert a claim of copyright or other property interest in such deliverables.

Compliance with Applicable Laws

Compliance with Laws: The Contractor shall comply with all laws, ordinances, codes, rules, regulations, and licensing requirements that are applicable to the conduct of its business, including those of federal, state, and local agencies having jurisdiction and/or authority.

Equal Employment Opportunity: The Contractor shall comply with all federal and State laws relating to equal employment opportunity.

Health Insurance Portability and Accountability Act (HIPAA): The Contractor agrees that, if the Division determines that some or all of the activities within the scope of this contract are subject to the Health Insurance Portability and Accountability Act of 1996, P.L. 104-91, as amended ("HIPAA"), or its implementing regulations, it will comply with the HIPAA requirements and will execute such agreements and practices as the Division may require to ensure compliance.

Confidentiality

Confidentiality: Any information, data, instruments, documents, studies or reports given to or prepared or assembled by the Contractor under this agreement shall be kept as confidential and not divulged or made available to any individual or organization without the prior written approval of the Division unless such documents are public records pursuant NC Public Records laws. The Contractor acknowledges that in receiving, storing, processing or otherwise dealing with any confidential information it will safeguard and not further disclose the information except as otherwise provided in this contract.

Data Security: The Contractor shall adopt and apply data security standards and procedures that comply with all applicable federal, state, and local laws, regulations, and rules.

Duty to Report: The Contractor shall report a suspected or confirmed security breach to the Division's Contract Administrator within twenty-four (24) hours after the NCDHHS TC1010 (General Terms and Conditions) (Local Government) (Rev. 8/24)

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breach is first discovered, provided that the Contractor shall report a breach involving Social Security Administration data or Internal Revenue Service data within one (1) hour after the breach is first discovered. During the performance of this contract, the grantee is to notify the Division contract administrator of any contact by the federal Office for Civil Rights (OCR) received by the Contractor.

Cost Borne by Contractor: If any applicable federal, state, or local law, regulation, or rule requires the Division or the Contractor to give affected persons written notice of a security breach arising out of the Contractor's performance under this contract, the Contractor shall bear the cost of the notice.

Oversight

Access to Persons and Records: The State Auditor shall have access to persons and records as a result of all contracts or grants entered into by State agencies or political subdivisions in accordance with General Statute 147-64.7. Additionally, as the State funding authority, the Department of Health and Human Services shall have access to persons and records as a result of all contracts or grants entered into by State agencies or political subdivisions.

Record Retention: State basic records retention policy requires all grant records to be retained for a minimum of five years or until all audit exceptions have been resolved, whichever is longer. If the contract is subject to Federal policy and regulations, record retention may be longer than five years. Records must be retained for a period of three years following submission of the final Federal Financial Status Report, if applicable, or three years following the submission of a revised final Federal Financial Status Report. Also, if any litigation, claim, negotiation, audit, disallowance action, or other action involving this Contract has been started before expiration of the five-year retention period described above, the records must be retained until completion of the action and resolution of all issues which arise from it, or until the end of the regular five-year period described above, whichever is later. The record retention period for Temporary Assistance for Needy Families (TANF) and MEDICAID and Medical Assistance grants and programs must be retained for a minimum of ten years.

Miscellaneous

Choice of Law: The validity of this contract and any of its terms or provisions, as well as the rights and duties of the parties to this contract, are governed by the laws of North Carolina. The Contractor, by signing this contract, agrees and submits, solely for matters concerning this Contract, to the exclusive jurisdiction of the courts of North Carolina and agrees, solely for such purpose, that the exclusive venue for

any legal proceedings shall be Wake County, North Carolina. The place of this contract and all transactions and agreements relating to it, and their situs and forum, shall be Wake County, North Carolina, where all matters, whether sounding in contract or tort, relating to the validity, construction, interpretation, and enforcement shall be determined.

Amendment: This contract may not be amended orally or by performance. Any amendment must be made in written form and executed by duly authorized representatives of the Division and the Contractor. The Purchase and Contract Divisions of the NC Department of Administration and the NC Department of Health and Human Services shall give prior approval to any amendment to a contract awarded through those offices.

Severability: In the event that a court of competent jurisdiction holds that a provision or requirement of this contract violates any applicable law, each such provision or requirement shall continue to be enforced to the extent it is not in violation of law or is not otherwise unenforceable and all other provisions and requirements of this contract shall remain in full force and effect.

Headings: The Section and Paragraph headings in these General Terms and Conditions are not material parts of the agreement and should not be used to construe the meaning thereof.

Gender and Number: Masculine pronouns shall be read to include feminine pronouns and the singular of any word or phrase shall be read to include the plural and vice versa.

Time of the Essence: Time is of the essence in the performance of this contract.

Care of Property: The Contractor agrees that it shall be responsible for the proper custody and care of any property furnished to it for use in connection with the performance of this contract and will reimburse the Division for loss of, or damage to, such property. At the termination of this contract, the Contractor shall contact the Division for instructions as to the disposition of such property and shall comply with these instructions.

Travel Expenses: Reimbursement to the Contractor for travel mileage, meals, lodging and other travel expenses incurred in the performance of this contract shall not exceed the rates published in the applicable State rules or approved local government travel policy. International travel shall not be reimbursed under this contract.

Sales/Use Tax Refunds: If eligible, the Contractor and all subcontractor shall: (a) ask the North Carolina Department of Revenue for a refund of all sales and use taxes paid by them in the performance of this contract,

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pursuant to G.S. 105-164.14; and (b) exclude all refundable sales and use taxes from all reportable expenditures before the expenses are entered in their reimbursement reports.

Advertising: The Contractor shall not use the award of this contract as a part of any news release or commercial advertising.

SCOPE OF WORK

BACKGROUND

Prediabetes is a medical condition where people have higher than normal blood glucose levels (mg/dl), but their mg/dl is not yet high enough to be diagnosed as diabetes. Nationally an estimated 96 million American adults have prediabetes, but only 19% have been notified by their healthcare provider (CDC, National Diabetes Statistics Report, 2022). African Americans, American Indians, Alaska Natives, Asians, Hispanics, Native Hawaiians, and other Pacific Islanders are at higher risk than non-Hispanic whites for developing type 2 diabetes (CDC, Diabetes Report Card 2021).

As of 2023, 2.7 million North Carolinians have prediabetes. In 2022, 12.1% of respondents to a Behavioral Risk Factor Surveillance system indicated that they had been told by a doctor or other health professional that they had prediabetes or borderline diabetes. Of these respondents, 30.3% were racial and ethnic minorities (North Carolina State Center for Health Statistics, BRFSS 2022).

This year alone, 68.9 thousand North Carolina residents have developed diabetes. The annual healthcare cost of diabetes in North Carolina is estimated to surpass \$17 billion by 2025 (North Carolina Diabetes Advisory Council Report 2020). Without lifestyle changes to improve their health, many people living with prediabetes are more likely to develop type 2 diabetes within five years (CDC, Prediabetes Fact Sheet 2020). Implementing The North Carolina Minority Diabetes Prevention Program (NC MDPP) will improve early detection and help slow the projected increase in type 2 diabetes prevalence and expenditure in North Carolina.

PURPOSE

To enable the Contractor to engage, screen, and deliver the North Carolina Minority Diabetes Prevention Program, including the CDC Diabetes Prevention Program curricula "Prevent T2" to cohorts of minority communities within its region.

PERFORMANCE REQUIREMENTS

The Contractor shall:

1. **Enter into a subcontract agreement** with Caswell County Health Department, Chatham County Public Health Department, Durham County Department of Public Health, Guilford County on behalf of the Guilford County Department of Health and Human Services-Division of Public Health, Orange County Health Department, Person County Health Department, Randolph County Public Health, and Rockingham County Department of Health and Human Services to deliver the CDC Diabetes Prevention Program curriculum: Prevent T2 or Prevenga el T2. A minimum of two Lifestyle Class series are required for successful performance under this contract. Submit the executed subcontract via the Smartsheet dashboard by August 4, 2025.
2. Provide **one Regional Coordinator** to serve the entire collaborative area.
3. **Apply for CDC recognition or maintain the existing CDC recognition for the Diabetes Prevention Program.** A copy of the CDC Diabetes Prevention Recognition Program Standards and Operating Procedures can be found at <https://www.cdc.gov/diabetes-prevention/media/pdfs/legacy/dprp-standards.pdf>.

The Regional Coordinator shall:

1. **Prepare a project plan** that demonstrates the plan to provide early detection, outreach, screening, follow-up and referral services for eligible minority populations. The project plan template will be available in the Smartsheet dashboard by July 1, 2025. The project plan shall be uploaded in Smartsheet by August 1, 2025.
2. **Implement** the lifestyle program, supervise daily operations related to the lifestyle program, provide support and guidance to lifestyle coaches, and ensure that the program achieves quality performance outcomes. The lifestyle program must include:
 - a. The use of a CDC-approved curriculum (i.e., Prevent T2 or Prevenga el T2) with lessons, handouts, and other resources.

- b. A Lifestyle Coach, specially trained to lead the program and facilitate discussions and help make the program fun and engaging.
 - c. A support group for participants where they can share ideas, celebrate successes, and work to overcome obstacles.
 - d. Physical activity opportunities.
 - e. CDC information about the lifestyle program
at www.cdc.gov/diabetes/prevention/lifestyleprogram/experience/index.html
3. **Ensure** that:
 - a. Participant and program data is entered into the NC MDPP database on a weekly basis.
 - b. Quarterly Performance Reports are submitted to the Division Program Manager by the dates listed below.
 - c. Monthly Financial Reports are signed and dated in blue ink and sent electronically as described below.
 - d. NC MDPP monthly calls are attended on the second Thursday of each month
 - e. NC MDPP mandatory training classes are attended.
4. **Distribute supplies to Lifestyle Coaches** including, but not limited to food models, blood pressure cuffs, blood pressure monitors, hemoglobin A1C testing instruments, digital scales, and computers (i.e., laptops, desktops, and tablets). Any additional supplies must be approved by the Division prior to distribution. All supplies (valued at more than \$10) must be logged within 24 hours of purchase and maintained in a secured storage area. Each staff member must sign and date the supply log when receiving an item valued at more than \$10. The log must include the serial number for all items, when applicable. The supply log shall be available for review during every site visit. Receipts are to be maintained by the month of purchase and available for review during every site visit.
5. **Conduct a targeted marketing and awareness campaign** utilizing existing CDC Diabetes Prevention Program and NC MDPP materials in minority communities using 5–10% of the budget. Marketing is to include one or more of the following:
 - a. Billboards and bulletins in minority neighborhoods.
 - b. Running advertisements in English and Spanish on English and Spanish language radio stations that rank highly in the target minority communities.
 - c. Direct mail, social media, Public Service Announcements, TV ads and other media outlets.
 - d. Recruitment at community events.
 - e. Recruitment at clinical offices (such as flyers and posters).
 - f. Healthcare provider information about prediabetes.
 - g. Worksite education and outreach.
 - h. Region specific marketing campaign.

Marketing materials should include the logos of the North Carolina Department of Health and Human Services and the North Carolina Office of Health Equity where appropriate. All approved logos will be sent via email by the OHE Program Manager to ensure updated logos are being used for marketing materials.

6. **Screen for prediabetes a minimum of 100 people**, ages 18 years and older. Screening more than the minimum number for prediabetes is allowed if screening is being used as one of several strategies to identify, refer and enroll people in the 12-month Lifestyle Class series. **One** of these screening methods is to be used:
 - a. A CDC prediabetes paper screening which requires a score of nine and above to indicate the presence of prediabetes. The CDC prediabetes paper screening can be found at <https://www.cdc.gov/diabetes/prevention/pdf/Prediabetes-Risk-Test-Final.pdf>.
 - b. A prediabetes paper screening from the American Diabetes Association (ADA) which requires a score of four and above to indicate the presence of prediabetes. The ADA prediabetes paper screening can be found at <http://main.diabetes.org/dorg/PDFs/risk-test-paper-version.pdf>.
 - c. Plasma glucose measured 2 hours after a 75-gm glucose load, with a result of 140 to 199 mg/dl.
 - d. A fasting blood glucose score of 100 to 125mg/dl.
 - e. A hemoglobin A1c test resulting in a level of 5.7-6.4 percent, or
 - f. Clinically diagnosed gestational diabetes mellitus during a previous pregnancy (may be self-reported).

7. From the population screened for prediabetes, **refer 100% of eligible people** to participate in the program and **refer 100% of persons** whose screening numbers indicate diabetes into diabetes self- management education programs. Document all referrals and include the number of referrals made in the performance reports.
8. For the **12-month NC MDPP Lifestyle Class series**:
 - a. **Enroll a minimum of 30 people** into those class series which begin during this contract's service period. Ensure that no less than 75% of the participants per region are members of racial/ethnic minority groups.
 1. All participants must have a body mass index (BMI) of ≥ 25 kg/m² (≥ 23 kg/m², if Asian American).
 2. The CDC requires that all Lifestyle Class participants be 18 years of age or older and not pregnant at time of enrollment. These programs are intended for adults at high risk for developing type 2 diabetes.
 3. All program participants must be considered eligible based on either:
 - a. A recent (within the past month) blood test (may be self-reported for CDC recognition purposes; but, for Medicare Diabetes Prevention Program suppliers, a self-reported blood test is not permitted) meeting one of these specifications:
 - 1) Fasting glucose of 100 to 125 mg/dl (CMS eligibility requirement for Medicare Diabetes Prevention Program suppliers is 110 to 125 mg/dl).
 - 2) Plasma glucose measured 2 hours after a 75-gm glucose load of 140 to 199 mg/dl.
 - 3) Hemoglobin A1C of 5.7 to 6.4.
 - 4) Clinically diagnosed gestational diabetes mellitus during a previous pregnancy (may be self-reported; allowed for CDC, but not for Medicare beneficiaries), or
 - b. A positive screening for prediabetes based on the CDC Prediabetes Screening Test, a screening result indicating high risk for type 2 diabetes on the paper or electronic version of the American Diabetes Association Type 2 Diabetes Risk Test (<https://diabetes.org/diabetes-risk-test>). Note: These are not options for eligibility for Medicare beneficiaries.
 4. Participants cannot have a previous diagnosis of type 1 or type 2 diabetes prior to enrollment.
 5. A health care professional may refer potential participants to the program, but a referral is not required for participation in CDC recognized programs.
 6. Recognized organizations can retain participants if the following occurs:
 - a. Participants who develop type 2 diabetes while in the program should be referred to their primary care provider for referrals to American Diabetes Association or American Association of Diabetes Education accredited diabetes self-management education and support programs, and other resources such as Medical Nutrition Therapy, as appropriate.
 - b. Lifestyle change programs for type 2 diabetes prevention emphasize weight loss and are not appropriate for women who are currently pregnant. Participants who become pregnant may continue at the discretion of their health care provider and the CDC recognized program delivery organization.
 7. A minimum of 35% of all participants in a yearlong cohort must be eligible for the lifestyle change program based on either a blood test indicating prediabetes or a history of gestational diabetes mellitus. The remainder (a maximum of 60% of participants) must be eligible based on the CDC Prediabetes Screening Test or the American Diabetes Association Type 2 Diabetes Risk Test. If a participant comes into a program based on a risk test score, organizations are permitted to make a one-time change to the participant's eligibility status based on a post-enrollment blood test. Evaluation for this requirement is based on all participants attending at least 3 sessions during months 1-6 and whose time from first session to last session is at least 9 months. At least 5 participants per submission who meet this criterion are required for evaluation. If a recognized organization is also a Medicare Diabetes Prevention Program supplier, all Medicare participants must be eligible based solely on a blood test indicating prediabetes. Refer to the Participant Eligibility section for more information. Note: While CDC is setting an organizational

requirement for eligibility, individual payers, including Medicare, may impose higher or lower participant level eligibility requirements for blood testing for reimbursement purposes.

9. **Enroll a minimum of 10 people** into the **Wholistics Health NC Minority Diabetes Prevention Program Chatbot** which are to begin during this contract service period, and ensure that no less than 50% of the participants per region are members of racial/ethnic minority groups.
10. **Maintain subscriptions** for the entire fiscal year to:
 - a. A subscription database approved by the Division. (The Wake Forest School of Medicine's NC Minority Diabetes Prevention Program data subscription service is already approved. Any new service must be approved by the Division.)
 - b. The Wholistics Health NC Minority Diabetes Prevention Program Chatbot subscription service.
11. **Track participant and program data**, including program outcomes, in the NC MDPP Database.
12. **Collect aggregate data** from all Regional Collaborative partners on the outcomes and effectiveness of the 12-month Lifestyle Class Series and report this data to the Division.
13. **Adhere to all document, reporting, and evaluation requirements and timelines** as designated by the Division, the approved data reporting system, and CDC, which can be found at: www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf.
14. **Administer an incentive program** for participants to promote successful completion of the 12-month Lifestyle class series. All incentive programs must be approved by the Division prior to administration.
15. **Organize and co-host at least one community forum** "Community Conversation" with the Division staff. During these Community Conversations, representatives from the Regional Collaborative and the Division will meet with community members for a discussion on prediabetes, its impact on the community's health and how we can all work together improve health outcomes and reduce the disparities.
16. **Organize and co-host at least two wellness events** ("Living Well Event") with Division staff. During these Living Well Events, representatives from the Regional Collaborative will meet with at least 15 community members for a discussion and an activity on health equity and chronic disease, nutrition, or physical activity. Activities can include fitness classes, cooking demonstrations, workshops, etc. These Living Well Events are to discuss the impact these topics are having on their own and on the community's health and how those attending the Living Well Events can begin to improve their own health status.

The Subcontractors shall:

1. **Provide a minimum of one Lifestyle Coach** to serve the entire collaborative area and conduct at least **two** 12-month Lifestyle Class series that begin during this contract's service period.
 - a. New Lifestyle coach hires must complete the two-day Diabetes Prevention Program Lifestyle Coach Training within 30 days of hire from a CDC approved training entity.
 - b. Documentation of Lifestyle Coach Training must be submitted to the Division Program Manager within 45 days of hire date.

Lifestyle coach shall:

1. **If newly hired**, complete the NC MDPP Lifestyle Coach Demographic Questionnaire provided by the Division.
2. **Conduct a minimum of two 12-month Lifestyle Classes series** across a minimum of three counties within the assigned region. The Coach and its collaborative partners may deliver additional classes (i.e., more than the minimum requirement of one session each month) for participants needing additional support.

All new 12-month Lifestyle Class series shall be conducted in accordance with the CDC recommendations, guidelines, standards, and operating procedures, as described in the "CDC Diabetes Prevention Recognition

Program Standards and Operating Procedures” document, which can be found at

www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf.

- a. The first six months of each series must include 16 weekly Lifestyle Classes.
- b. The last six months of each series must include a minimum of 6 follow-up Lifestyle Classes.
- c. If circumstances warrant limiting person-to-person contact, the Coach may offer virtual classes. All virtual classes must receive prior approval from the Division Program Manager. If approved, the Coach shall:

- 1. Offer virtual classes via video chat (on platforms such as Zoom, Google Chat, FaceTime, etc.) or via conference calls:
 - a) As a replacement for some or all in-person classes.
 - b) As a method of communicating with participants to keep them motivated and engaged.
 - c) To facilitate the CDC “Prevent T2/Prevenga el T2” curriculum.
- 2. Track virtual participants attendance:
 - a) Time Requirement – All participants who choose to participate in the video chat platform/conference call options must be present and active for a minimum of 40 minutes to receive full credit and meet attendance requirement.
 - b) Make-Up Class – For those participants who are unable to attend the video chat platform or conference call options, follow the CDC guidelines for make-up classes.
- 3. Document Participant Incentives:
 - a) Requirements – For participants to receive incentives for the corresponding class, participants must meet the following guidelines:
 - 1) Attend class – Be present for a minimum of 40 minutes or more.
 - 2) Send weight via self-report.
 - 3) Send physical activity log via self-report. The self-report must include a detailed description and proof of physical activity.
 - b) Distribution – Incentive distribution options include but are not limited to:
 - 1) United States Postal Service delivery.
 - 2) Participants pick up and/or “drive through” locations.
 - 3) Postpone distribution until in-person classes resume.
 - c) Incentive Logs – Incentive logs must remain up to date, accurate, and include the incentive distribution delivery method selected.

- d. Maintain the following retention rates:

- 1. During the first six months (weekly classes) of the series:
 - a. 50% of participants complete 4 Lifestyle Classes.
 - b. 33% of participants complete 8 Lifestyle Classes.
 - c. 25% of participants complete 9 or more Lifestyle Classes.
- 2. During the last six months (monthly classes) of the series:
 - a. 50% of participants complete 3 of the Lifestyle Classes.
 - b. 33% of participants complete 6 of the Lifestyle Classes.

- 3. **Administer the NC MDDP Pre-Knowledge, Post-Knowledge, and Behavioral Health Questionnaires** to all participants at baseline, during the last Phase 1 Lifestyle Class, and during the final Phase 2 Lifestyle Class. Enter the questionnaire data, participant data, and program data into the NC MDPP database on a weekly basis. The questionnaire will be provided by the Division Program Manager.
- 4. **Encourage and provide opportunities** for Lifestyle Class participants to complete hemoglobin A1C testing at baseline, during the Phase 1 Lifestyle Class, and during the final Phase 2 Lifestyle Class.
- 5. **Deliver the program** in a way that increases the capacity of participants to make and sustain positive lifestyle changes. This includes understanding and being sensitive to issues and challenges for individuals trying to make and sustain significant lifestyle changes.
- 6. **Encourage Lifestyle Class participants** to talk to their physician before starting a physical activity regimen. Promote increased physical activity by encouraging Lifestyle Class participants to achieve a minimum of 150

minutes of physical activity per week. Promote physical activity goals as recommended by their physician throughout the 12-month Lifestyle Class series.

7. **Provide support and guidance** to class participants and implement standard curriculum designed for the lifestyle program by the CDC.
8. **Make and document** a minimum of four good faith attempts to follow-up with participants who miss a weekly session during the first six months of the program or who miss a monthly session during the last six months of the program. Each participant follow-up should include two telephone calls and a written letter or email, and may include a home visit.
9. **Maintain** an outreach log to track correspondence with the participants.
10. **Participate** in all mandatory Division training sessions and monthly Lifestyle Coach calls organized by the Division.

Regional Coordinator and Lifestyle Coaches shall:

1. **Provide culturally appropriate items and services to participants** that address barriers to participating in the program.

PERFORMANCE STANDARDS

Screening and Referrals Measures

1. Minimum Standard: 100
Total number of people screened for prediabetes via community and clinical methods in FY 25-26.
2. Minimum Standard: 100%
Percent of eligible people referred to 12-month Lifestyle Class series.
3. Minimum Standard: 100%
Percent of eligible people referred to DSME program.
4. Minimum Standard: $\geq 75\%$
Percent of minority participants in community and clinical screening events.

NC MDPP Program Measures

1. Minimum Standard: ≥ 2
Number of 12-month Lifestyle Class series offered across region.
2. Minimum Standard: 30
Number of people enrolled in 12-month Lifestyle Class series.
3. Minimum Standard: $\geq 50\%$
Percentage of participants who attend ≥ 1 Lifestyle Classes in the first 6 months of the 12-month Lifestyle Class series.
4. Minimum Standard: $\geq 33\%$
Percentage of participants who attend ≥ 8 Lifestyle Classes in the first 6 months of the 12-month Lifestyle Class series.
5. Minimum Standard: $\geq 25\%$
Percentage of participants who attend ≥ 9 Lifestyle Classes in the first 6 months of the 12-month Lifestyle Class series.
6. Minimum Standard: $\geq 50\%$
Percentage of participants who attend 16 Lifestyle Classes in the first 6 months of the 12-month Lifestyle Class series.
7. Minimum Standard: $\geq 50\%$
Percentage of participants who attend ≥ 4 Lifestyle Classes in the last 6 months of the 12-month Lifestyle Class series.
8. Minimum Standard: 33%
Percentage of participants who attend 3 to 4 Lifestyle Classes in the last 6 months of the 12-month Lifestyle Class series.
9. Minimum Standard: $\geq 60\%$
Percentage of minority participants in Lifestyle Classes.

10. Minimum Standard: ≥ 5
Number of incentives distributed per participant.
11. Minimum Standard: $\geq 50\%$
Percentage of participants who attend a minimum of four Lifestyle Classes and lose $\geq 5\%$ of their baseline body weight.
12. Minimum Standard: $\geq 50\%$
Percentage of participants who report a change in knowledge.
13. Minimum Standard: $\geq 50\%$
Percentage of participants who report a change in behavior.
14. Minimum Standard: ≥ 1
Number of Community Conversation events offered across the region.
15. Minimum Standard: ≥ 2
Number of Living Well events offered across the region.

Outreach Measures

1. Minimum Standard: 100
Number of people who attend community screening events.
2. Minimum Standard: 100
Number of people who submitted clinical screening results.
3. Minimum Standard: ≥ 2
Number of follow-up emails to non-compliant enrollees.
4. Minimum Standard: ≥ 1
Number of follow-up emails to non-complaint enrollees.

Media and Training Measures

1. Minimum Standard: 100%
Attendance and participation in mandatory monthly meetings.
2. Minimum Standard: 100%
Attendance and participation in Division trainings.

Targeted Marketing & Awareness Campaign Measures

1. Minimum Standard: ≥ 1
Number of billboards or bulletins flights in minority communities (English and Spanish).
2. Minimum Standard: ≥ 10
Number of Regional NC MDPP-focused radio ads and PSAs ran during FY 25-26.
3. Minimum Standard: ≥ 1
Number of Regional NC MDPP-focused newspaper ads and impressions (English and Spanish).
4. Minimum Standard: ≥ 5000
Estimated number of people reached through the targeted marketing and awareness campaign.

PERFORMANCE MONITORING/QUALITY ASSURANCE PLAN

Reporting Requirements

The Contractor will complete the following reports via the Smartsheet dashboard, which can be accessed at <https://app.smartsheet.com>. All the due dates for these reports are posted on the Smartsheet dashboard.

- a. Monthly Financial Reports: Submit monthly financial reports by the 10th of each month via the Smartsheet dashboard. These monthly financial reports will report on the prior month's expenses.
- b. Quarterly Performance Reports: Submit quarterly performance reports via the Smartsheet dashboard. These reports will detail the prior quarter's progress on implementing the contract required activities according to the following schedule:

<u>Performance Quarter Report Submission Deadline</u>	
June-August	September 30, 2025
September-November	December 31, 2025

December-February

March 31, 2026

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Quarterly, Monthly and Annual Monitoring Activities

The Division Program Manager will conduct monthly financial and desk reviews to monitor adherence to the approved budget, timely spending, and reconciliation of negative balances across all regions

The Division Program Manager will conduct quarterly comprehensive review of the program implementation to ensure its success.

The Division Program Manager will conduct annual site visits on a mutually agreed-upon date. Following the meeting, a thorough review of contracts, incentive logs, and invoices/receipts pertaining to a specific month will be conducted.

All results will be communicated in a report. The report will include a detailed analysis of the monitoring steps conducted and the findings, if applicable, along with the next steps regarding corrective action. Risks will also be communicated in a report, including the justification of the risk category and actions steps that will be taken by the Division, as well as expectations.

If the Division determines that deliverables are not being met, the Division Program Manager will request a written response from the Contractor that documents the barriers that are preventing meeting the deliverables. The Division staff shall provide technical assistance and funds may be withheld until the Contractor is in compliance with deliverables. If technical assistance does not prove beneficial, contract may be terminated.

Funds will be re-allocated if project tasks and deliverables included in the project plan are not achieved in a reasonable timeframe.

REIMBURSEMENTS

Upon execution of this contract, the Contractor shall submit to the Division Program Manager, a monthly reimbursement request for services rendered the previous month by the 15th of each month and, upon approval by the Division, receive payment within 30 days. Monthly payment shall be made based on actual expenditures made in accordance with the approved budget and reported on the monthly expenditure report submitted by the Contractor.

If this contract is terminated, the Contractor shall complete a final accounting report and return any unearned funds to the Division within 30 days of the contract termination date. The Division shall have no obligation for payments based on expenditure reports submitted later than 30 days after termination or expiration of the contract period. All payments are contingent upon fund availability.

PERFORMANCE MEASURES CHART

The Department of Health and Human Services uses performance measures rubrics as a tool to determine the success of a project and how well services and products are being delivered. Together they enable the Department to gauge efficiency, determine progress toward desired results and assess whether the Department is on track with meeting its goals. The Contractor shall adhere to all the performance requirements/standards in the scope of work, including performance measures in the performance measures chart below.

Measure Type	Output	Reporting Frequency	Annual
Measure	At least 75% of Regional NC MDPP participants are of an ethnic or racial minority.		

Fiscal Year	2026	Trend	Increase
Baseline Value	0		
Target Value	75%		
Data Source	NC MDPP Data Platform		
Collection Process and Calculation	The contractor will gather patient demographics at enrollment		
Collection Frequency	As participants are enrolled		

Measure Type	Output	Reporting Frequency	Quarterly
Measure	Offer at least two 12-month lifestyle class series across the region.		

Fiscal Year	2026	Trend	Increase
Baseline Value	0		
Target Value	2		
Data Source	NC MDPP Data Platform		
Collection Process and Calculation	The contractor will gather class data at enrollment		

Collection Frequency	As participants are enrolled
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Measure Type	Output	Reporting Frequency	Quarterly
Measure	Host at least 15 participants during a Living Well event.		

Fiscal Year	2026	Trend	Increase
Baseline Value	0		
Target Value	15		
Data Source	Participant enrollment		
Collection Process and Calculation	The contractor will gather participant data during event sign up/enrollment		
Collection Frequency	As participants are enrolled		

Measure Type	Output	Reporting Frequency	Quarterly
Measure	Enroll at least 30 participants into the 12-month lifestyle class series.		

Fiscal Year	2026	Trend	Increase
Baseline Value	0		
Target Value	30		
Data Source	NC MDPP Data Platform		
Collection Process and Calculation	The contractor will gather enrollment numbers at participant enrollment		
Collection Frequency	As participants are enrolled		

Measure Type	Output	Reporting Frequency	Quarterly
Measure	Screen a minimum of 100 people for prediabetes via community and clinical methods in FY 24-25.		

Fiscal Year	2026	Trend	Increase
Baseline Value	0		
Target Value	100		
Data Source	CDC Paper Screeners or A1c Tests		
Collection Process and Calculation	The contractor will gather screening data upon collection of screening tests/A1c results.		
Collection Frequency	As participants are serviced.		

Measure Type	Outcome	Reporting Frequency	Annual
Measure	At least 50% of Regional NC MDPP participants attend a minimum of four lifestyle classes and lose more than 5% of their baseline body weight.		

Fiscal Year	2026	Trend	Increase
Baseline Value	0		
Target Value	50%		
Data Source	NC MDPP Data Platform		
Collection Process and Calculation	The contractor will gather participant outcomes at the end of the class series.		
Collection Frequency	Participant data is collected weekly		

Measure Type	Outcome	Reporting Frequency	Annual
Measure	At least 50% of Regional NC MDPP Participants report a change in knowledge.		

Fiscal Year	2026	Trend	Increase
Baseline Value	0		
Target Value	50%		
Data Source	NC MDPP end of program survey		
Collection Process and Calculation	The contractor will administer the end of program survey at the end of the lifestyle class series		
Collection Frequency	At program end		

Measure Type	Outcome	Reporting Frequency	Annual
Measure	At least 50% of Regional NC MDPP Participants report a change in behavior.		

Fiscal Year	2026	Trend	Increase
Baseline Value	0		
Target Value	50%		
Data Source	NC MDPP end of program survey		
Collection Process and Calculation	The contractor will administer the end of program survey at the end of the lifestyle class series		
Collection Frequency	At program end		

LINE ITEM BUDGET

This begins the line item budget for year 2026

Budget Detail - Year 2026			
Category	Item	Narrative	Amount
Salary/Wages		Annual salary for full time regional coordinator; 2% prorated merit increase added for FY26. If COLA is provided for county employees in FY26 adopted budget, a realignment will need to be submitted to accommodate for this increase.	\$57,964.00
Fringe Benefits		FY26 retirement rate = 14.39% 2% 401(k) employer match Health insurance premium = \$9024/year Dental insurance premium = \$594/year Worker's compensation premium = 2% Life insurance premium = 0.20% Dep life = \$9.60/year	\$24,848.00
Other			\$0.00
Equipment	Medical	A1c cassettes for forum and screenings (\$90 per box of 10 x 9 boxes = \$810), Controls for machine-\$115	\$925.00
Travel	Board Members Expense (Travel, Per Diem)	376 miles x .70rate = \$263.2	\$264.00
Utilities	Telephone	Phone bill: \$76.71*12 months	\$921.00

Budget Detail - Year 2026			
Category	Item	Narrative	Amount
Repair and Maintenance			\$0.00
Staff Development		\$610 for hotel stay, NCPHA Registration- \$285	\$895.00
Media/Communication	Websites and web materials	Maintenance and updates of regional website: 16+ hours of graphic creation/editing, user experience recording, analysis and reporting, consultation, content creation and research, search engine optimization	\$2,000.00
Media/Communication	Promotional Items	Stress balls- 600 count x \$1.48 plus \$140 set up fee= \$1,028, Two tone Shopping tote bag- 350 count x \$2.40 plus 130 set up fee= \$970	\$2,000.00
Dues and Subscriptions		\$3000: NC Chatbot	\$3,000.00
Operational Other	Not Otherwise Classified	Living Well	\$300.00
Operational Other	Incentives and Participants	Alamance County incentives for 10 participants (includes portion plates (\$5), calorie king books(\$12), fitness trackers (\$30) t-shirts (\$14.5), digital food scales(\$12), bathroom scales(\$20), , George Foreman Grill (\$50) = (\$143.5 per participant for all the above incentives x 10 =\$1435).	\$1,435.00
Subcontracts and Grants			\$99,997.00
Match			\$0.00

Budget Detail- Year 2026			
Category	Item	Narrative	Amount
Cost Per Service			\$0.00
Sub Total			\$194,549.00
Indirect Cost		Indirect cost for Lead county coordinator time spent on MDPP grant activities (\$27.8/hour x 20 hours)	\$556.00
Total Budget			\$195,105.00

Subcontracting and Grants Budget Detail- Year 2026			
Category	Item	Narrative	Amount
Salary\Wages		Caswell: \$3613, Guilford: \$1,950- 1 contracted coach (\$75/class x 26 classes) = \$1950/each Randolph: \$3928- One PH Educator II spending approximately 90 hours and one PH Educator II spending approximately 50 hours toward implementing Lifestyle class series and making sure that all performance measures/reporting requirements are met per Agreement Addendum for the Minority Diabetes Prevention Program. Person: \$11,000 Time for 1 Lifestyle Coach Rockingham: \$4387.00 - Projected salaries for 1 Health Education Manager and 2 Public Health Education Specialists. Orange: \$8688- 7% of Office Assistant Salary & 8% of RD Salary - Lifestyle Coach for MDPP	\$33,566.00

Subcontracting and Grants Budget Detail - Year 2026			
Category	Item	Narrative	Amount
Fringe Benefits		Caswell: \$1,393 Randolph: \$1695 Rockingham: \$3392.00 - Projected fringe benefits for 1 Health Education Manager and 2 Public Health Education Specialists. Orange: \$4288- 7% of Office Assistant Benefits & 8.0% of RD Benefits -Lifestyle Coach for MDPP	\$10,768.00
Other		Alamance: \$6,074-Contracted Staff	\$6,074.00
Repair and Maintenance			\$0.00
Staff Development		Chatham:\$500- Conferences, trainings, continuing education opportunities Guilford:\$2,000- DTTAC Webinars (3 coaches: 4 webinars/ea (12 x 55 = \$660); APHA Conference Registration (3 coaches x 425 = \$1275) (Person):\$300- Training for 2 Lifestyle Coaches Rockingham: \$750.00 - Lifestyle Coach Training (1) x \$700 = \$700.00; Advanced Lifestyle Coach Training (1) x \$50 = \$50.00 Orange: \$200- 2 hours of annual CEC to maintain Lifestyle Coach certifications for lead and in-kind instructor.	\$3,750.00
Dues and Subscriptions		Chatham: \$750- Wake Forest Database Service Fee Durham \$1500- Dues: Wake Forest Database dues for fiscal year 24-25 and 25-26 Guilford:\$750-Wake Forest Database	\$3,000.00

Subcontracting and Grants Budget Detail - Year 2026			
Category	Item	Narrative	Amount
Subcontracts and Grants			\$0.00
Indirect Cost			\$0.00
Cost Per Service			\$0.00
Supplies and Materials	Furniture	Durham \$600- Furniture: 2 standard folding tables, 3 chairs with life in 24 logo (Person) \$173 - Binders (12) x \$50/12 pack = \$50; 32 Tab Section Dividers (12) x \$9 = \$108; Legal Pads (12) x \$15/12 pack = \$15	\$773.00
Supplies and Materials	Other	Caswell: \$800- Tablecloth (1) x \$225 = \$225, Wagon (1) x \$225 = \$225, Jacket (1) x \$75 = \$75, Polo (1) x \$50 = \$50, Banner (1) x \$225 = \$225 Durham \$400- Other/Supplies: 2 pedestal sign stands, 2 plasticade poster holders Guilford \$370- 3 ring binders (\$22/ea x 10 (6/pk)) = \$220; participant notepads (\$25/ea x 5 (12/pk)) = \$125; Highlighters (\$25/ea x 1 (100/pk)) = \$25 Rockingham: \$635.00 - Notebooks (30) x \$8.35 = \$250.00; Pens [12 pens per box] (5) x \$10.00 = \$50.00; Tabbed dividers (30) x \$11.00 = \$330; White board cleaner spray (1) x \$5.00 = \$5.00	\$2,205.00
Equipment	Office	Caswell: \$549- Toner (2) x \$144.99 = \$290, Stationery and Restocks (Pens, Notebooks, Printer Paper, Folders, Tape, Staples etc) \$249	\$549.00

Subcontracting and Grants Budget Detail - Year 2026			
Category	Item	Narrative	Amount
Equipment	Medical	Chatham: \$1,700- A1c kits for cohort and screenings (\$68/kit x 10 kits = 1680, plus tax and fees) Guilford: \$1,000- A1c kits (\$128.57/ea x 7 (10/ct) = \$900); Lancets (\$20/ea x 5 (100/ct) = \$100) (Person): \$240 ~ 12 A1C screenings x ~\$20 = \$240 (DPP participants at the end of the program for evaluation purposes) Rockingham: \$510.00 - Siemens HbA1c Test Kits [10 tests per kit] (5) x \$102.00 = \$510.00	\$3,450.00
Travel	Contractor Staff	Randolph: \$210- Travel for lifestyle coaches: 300 miles x .70/mile = \$210.00 to promote and implement MDPP program. Orange: \$500- Local travel to class locations and community events (\$0.70/mil* 714 miles).	\$710.00
Media/Communication	Advertising	Caswell: \$130- VistaPrint Brochures (100) x \$0.80 = \$80.00, Bookmarks (100) x \$0.50 = \$50.00 Chatham: \$500- Advertising- print materials/rack cards (250), newspaper ads (250) (Person): \$1,700 Advertising to promote and recruit participants for Session 0 and/or next DPP class (newspaper and radio advertisements). Newspaper ads (5) x \$300 = \$1500; Radio ads (20) x \$10 = \$200	\$2,330.00
Media/Communication	Promotional Items	Caswell: \$875- Prediabetes/Diabetes Cookbooks (25) x \$15.99 = \$400, Portion Control Containers (25) x \$12.00 = \$300, Meal Planners (25) x \$6.99 = \$175 Chatham: \$500- Positive Promotions- health fair giveaways, bags, promotional items) Durham \$1000- Promotional Items: English and Spanish promotional postcards, (3) Staff jackets with logo Guilford: \$1,323- Eat Right Handouts (3/ct x 80 = \$240); Program	\$4,698.00

Line Item Budget Detail (08/11)

Subcontracting and Grants Budget Detail - Year 2026			
Category	Item	Narrative	Amount
		Shirts (39ct x 15.85/ea = \$618.15); Hats (100ct x 4.62/ea = \$462) Rockingham: \$1,000.00 - Imprinted vegetable steamers (200) x \$5.00 = \$1,000.00	
Media/Communication	Reprints	Guilford: \$1,250- Participant Guides (14/ct x \$73.55= \$1,029.7); Action Plan Journal (200/ct x 1.10 = \$220) (Person):\$ 875- Charges to outsource printing of participant manuals and logs	\$2,125.00
Operational Other	Incentives and Participants	Caswell: \$1,000 Food and Snacks \$200.00, Gym Bags (12) x \$19.99 = \$240, Water Bottles (12) x \$30.00 = \$360, Tshirts (12) x \$16.66 = \$200 Chatham:\$5,857-Incentives: \$3457- yoga mats- \$12, portion plate- \$7, cookbooks-\$10, resistance bands-\$15, water bottles- \$15, exercise balls- \$17, dumbbells- \$10, 10 participants, 24 classes. Food and Snacks: DPP classes, Community Conversations, Lunch and Learns-\$2400- \$10/participant, 24 classes. Durham: \$6773- Incentives and Food for Participants \$6773.00: Incentives for 25 participants including \$25 Foodlion gift card, weights, standard water bottle or fruit infuser water bottle, tshirt, calorie king book or choose your food (Spanish book), Fitness Tracker, Digital Bathroom Scale, Lunch Box, Veggie Steamer, Graduation item of Airfryer, Nutri Bullet or Indoor grill total items per participants to be around \$196 each (\$196x25=\$4900) Food and Snacks \$1873 Food \$15/meal for 15 participants in person for 4 sessions(\$225 X4 =900)and \$15/meal for 10 participants in online class for 2 sessions ((\$150x2 =\$300) and \$673 for snacks	\$23,537.00

Line Item Budget Detail (08/11)

Subcontracting and Grants Budget Detail - Year 2026			
Category	Item	Narrative	Amount
		and water during in person sessions. Guilford: \$3,000- Airfryer (12 x \$50 = \$600); Nutribullet (12 x \$58 = \$696); Fitbit (12 x \$79 = \$948); Food & Snacks (12 participants x \$15/pp = \$180 (meals offered at 2 classes x2= \$360)); \$396 for waters & snacks at classes. Randolph: \$817- 'General supplies for classes and marketing: food for cooking portion of class, snacks/water, incentives, printing paper/ink for MDPP course materials, and other materials as needed. Person- \$1585 -Calorie King Books (12) x \$15 = \$180; Portion Plates/set of 6 (2) x \$20 = \$40; Yellow TheraBands (1) x \$65 = \$65; Red TheraBands (1) x \$75 = \$75; Green TheraBands (1) x \$70 = \$70; Hand Weight Sets (12) x \$15 = \$180; Grills (12) x \$40 = \$480; Bathroom Scales (12) x \$20 = \$240; Air Fryer (1) x \$140 = \$140; Food Chopper (1) x \$40 = \$40; Slow Cooker (1) x \$75 = \$75 Rockingham: \$855.00 - Fit & Fresh lunch bag w/ containers (15) x \$30.00 = \$450.00; Zulu water bottle cleaning set (15) x \$7.00 = \$105.00; Dalix gym bag (15) x \$20.00 = \$300.00	

		Orange: \$3,650- Training Notebooks Printing- \$28.50 x 10qty= \$285.00,1.5-inch Buinder (4 pack) \$21.99 x 3qty= \$65.97, Calorie	
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Subcontracting and Grants Budget Detail - Year 2026			
Category	Item	Narrative	Amount
		King Books \$14.99x 10qty= \$149.90, Fitness Trackers \$29.50x 10qty= \$295.00, Portion Plate w/ Lid \$3.20x 10qty= \$32.00, OCHD Logo Duffle Bag \$13.00x 10 qty= \$130.00, Digital Food Scale \$12.99x 10 qty= \$129.90, 2 Farmer's Market Gift Card \$10.00x 10 qty= \$100.00, Bathroom Scale \$20.99x 10 qty= \$209.90, Resistance Band \$9.88x 10 qty= \$98.80, Yoga Mats and Strap \$20.49x 10 qty= \$204.90, 5# Hand Weights \$16.99x 10 qty= \$169.90, Grocery Store Gift Card \$25.00x 10 qty= \$250.00, Ear Buds \$14.99x 10 qty= \$149.90, Exercise Cards (Desk/Body Wt) \$21.89x 10 qty= \$218.90, George Forman Grill \$34.99x 10 qty= \$349.90, Exercise Incentive of Choice \$25.00x 10 qty= \$250.00, Graduation Lunch \$13.98x 10 qty= \$139.80, Graduation Bag \$42.00x 10 qty= \$420.00, Printing of MDPP Class Handbooks 10 participants- (\$285)	
Operational Other	Not Otherwise Classified	Caswell: \$700- Living Well Events: 1 Physical Activity Event/Lunch and Learn (15) participants x \$15 meal = \$225, 1 Nutrition Event/ Lunch and Learn (15) participants x \$15 meal = \$225 Food Lion/Resturant Gift Cards (5) x \$50 = \$250 Durham \$450- Living Well Event-2 event- food for up to 15 participants at \$15 each is 15x30=\$450 Orange: \$1,312-Live Well Supplies- \$1,000, Class Supplies (including snacks)- \$312.00,(snacks/water for classes - \$262; office supplies - \$50)	\$2,462.00
Sub Total			\$99,997.00

Salaries - Year 2026								
Persons	Position or Title	Annual Salary	Hourly Rate	Months	Work %	Fringe Amount Total	Fringe Percent Total	Total

Line Item Budget Detail (08/11)

I	Regional Coordinator	\$57,964.00	0.0000	12	100.00	\$24,848.00	\$0.00	\$82,812.00

Salary Year 2026								
Persons	Position or Title	Annual Salary	Hourly Rate	Months	Work %	Bring Forward Amount Total	Bring Forward Percent Total	Total
					%			

Contractor Certifications Required by North Carolina Law

Instructions: The person who signs this document should read the text of the statutes and Executive Order listed below and consult with counsel and other knowledgeable persons before signing. The text of each North Carolina General Statutes and of the Executive Order can be found online at:

- Article 2 of Chapter 64: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/ByArticle/Chapter_64/Article_2.pdf
- G.S. 133-32: <http://www.ncga.state.nc.us/gascripts/statutes/statutelookup.pl?statute=133-32>
- Executive Order No. 24 (Perdue, Gov., Oct. 1, 2009): <https://ethics.nc.gov/media/242/download?attachment>
- G.S. 105-164.8(b): http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_105/GS_105-164.8.pdf
- G.S. 143-48.5: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter_143/GS_143-48.5.html
- G.S. 143-59.1: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_143/GS_143-59.1.pdf
- G.S. 143-59.2: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_143/GS_143-59.2.pdf
- G.S. 143-133.3: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter_143/GS_143-133.3.html
- G.S. 143B-139.6C: http://www.ncga.state.nc.us/EnactedLegislation/Statutes/PDF/BySection/Chapter_143B/GS_143B-139.6C.pdf

Certifications

- (1) Pursuant to G.S. 133-32 and Executive Order No. 24 (Perdue, Gov., Oct. 1, 2009), the undersigned hereby certifies that the Contractor named below is in compliance with, and has not violated, the provisions of either said statute or Executive Order.
- (2) Pursuant to G.S. 143-48.5 and G.S. 143-133.3, the undersigned hereby certifies that the Contractor named below, and the Contractor's subcontractors, complies with the requirements of Article 2 of Chapter 64 of the NC General Statutes, including the requirement for each employer with more than 25 employees in North Carolina to verify the work authorization of its employees through the federal E-Verify system." E-Verify System Link: www.uscis.gov
- (3) Pursuant to G.S. 143-59.1(b), the undersigned hereby certifies that the Contractor named below is not an "ineligible Contractor" as set forth in G.S. 143-59.1(a) because:
 - (a) Neither the Contractor nor any of its affiliates has refused to collect the use tax levied under Article 5 of Chapter 105 of the General Statutes on its sales delivered to North Carolina when the sales met one or more of the conditions of G.S. 105-164.8(b); and
 - (b) [check one of the following boxes]
 - ☒ Neither the Contractor nor any of its affiliates has incorporated or reincorporated in a "tax haven country" as set forth in G.S. 143-59.1(c)(2) after December 31, 2001; or
 - ☐ The Contractor or one of its affiliates has incorporated or reincorporated in a "tax haven country" as set forth in G.S. 143-59.1(c)(2) after December 31, 2001 but the United States is not the principal market for the public trading of the stock of the corporation incorporated in the tax haven country.
- (4) Pursuant to G.S. 143-59.2(b), the undersigned hereby certifies that none of the Contractor's officers, directors, or owners (if the Contractor is an unincorporated business entity) has been convicted of any violation of Chapter 78A of the General Statutes or the Securities Act of 1933 or the Securities Exchange Act of 1934 within 10 years immediately prior to the date of the bid solicitation.
- (5) Pursuant to G.S. 143B-139.6C, the undersigned hereby certifies that the Contractor will not use a former employee, as defined by G.S. 143B-139.6C(d)(2), of the North Carolina Department of Health and Human Services in the administration of a contract with the Department in violation of G.S. 143B-139.6C and that a violation of that statute shall void the Agreement.
- (6) The undersigned hereby certifies further that:
 - (a) He or she is a duly authorized representative of the Contractor named below;
 - (b) He or she is authorized to make, and does hereby make, the foregoing certifications on behalf of the Contractor; and
 - (c) He or she understands that any person who knowingly submits a false certification in response to the requirements of G.S. 143-59.1 and -59.2 shall be guilty of a Class I felony.

Contractor's Name: Alamance County Health Department

Contractor's

Authorized Agent: Signature Tony Lo Giudice (May 14, 2024 12:19 EDT)

Date 05/14/2024

Printed Name Tony Lo Giudice

Title Local Health Director

Witness:

Signature Janna Elliott

Date 05/14/2024

Printed Name Janna Elliott

Title Assistant Director of Operations

The witness should be present when the Contractor's Authorized Agent signs this certification and should sign and date this document immediately thereafter.

Effective 03/12/18
(Revised 08.22.2023)

Contractor Name: County of Alamance, Alamance County Health Department

Contractor Type: Local Government

Federal Tax ID or SSN #: 566000271

Group #: [Click or tap here to enter text.]

UEI #: [Click or tap here to enter text.]

Contract Administrator: Emanuel Barrera

Email: Emanuel.Barrera@alamancecountync.gov **Telephone:** 336-639-4284

Contractor Signature Authority: Tony LoGiudice

Contract Purpose: To deliver the North Carolina Minority Diabetes Prevention Program.

Division Approvals

Signed by:

Portia Pope

Division Contract Administrator

Telephone

DocuSigned by:

Jeff Marcum

07/03/25 | 4:21 PM EDT

Budget Officer Signature

Date

☒ Funds Budgeted ☐ Funds Proposed

☐ Funds Proposed requires realignment BR# _____

Signed by:

Debra Farrington

07/03/25 | 11:51 AM EDT

Section Chief Signature

Date

Signed by:

Tatiana Mendi

07/03/25 | 2:15 PM PDT

Contract Manager/Office Signature

Date

Division HR Signature

Date

Division ISO Signature, if required

Date

Signed by:

Portia Pope

07/03/25 | 11:26 AM EDT

Division Director Signature

Date

Comments:

Division PO# [Click or tap here to enter text.]

OW Contract# 00049314

EBSS# [Click or tap here to enter text.]

Contract Title: Alamance County NC Minority Diabetes Prevention Program

Service Name: [Click or tap here to enter text.]

Contracts Dates: 6/1/2025 to 5/31/2026

Amended Contract Dates: [Click or tap to enter a date.] to [Click or tap to enter a date.]

Contract Type: ☒ FA or ☐ POS

Status: Renew **Amd#** [Click or tap here to enter text.]

Sub Contract [Choose an item.] **HIPAA BAA:** No

IT Contract No **How Procured** Government

Contract Total Value

\$195,105.00

Amendment Amount:

\$ -

New Contract Total Value:

\$ -

Department Approvals

Budget & Analysis, if IT contract

Date

PIO Signature, if required

Date

HR Director Signature (required for Services)

Date

DHHS ITD Signature, if required

Date

OPCG Final Approval Signature

Date

OPCG Tracking # _____

Alamance NC MDPP FY 26 Contract and CAF

Final Audit Report

2025-09-24

Created:	2025-09-18
By:	Janna Elliott (janna.elliott@alamancecountync.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAAo8sKoQ-ReqAwseVudwH_HU-aTROsCKST

"Alamance NC MDPP FY 26 Contract and CAF" History

-  Document created by Janna Elliott (janna.elliott@alamancecountync.gov)
2025-09-18 - 3:05:17 PM GMT
-  Document emailed to Susan Evans (Susan.Evans@alamancecountync.gov) for signature
2025-09-18 - 3:11:37 PM GMT
-  Email viewed by Susan Evans (Susan.Evans@alamancecountync.gov)
2025-09-19 - 3:50:44 AM GMT
-  Signer Susan Evans (Susan.Evans@alamancecountync.gov) entered name at signing as Susan R. Evans
2025-09-23 - 11:25:41 PM GMT
-  Document e-signed by Susan R. Evans (Susan.Evans@alamancecountync.gov)
Signature Date: 2025-09-23 - 11:25:43 PM GMT - Time Source: server
-  Document emailed to dbechtel@teaguecampbell.com for signature
2025-09-23 - 11:25:45 PM GMT
-  Email viewed by dbechtel@teaguecampbell.com
2025-09-23 - 11:26:05 PM GMT
-  Signer dbechtel@teaguecampbell.com entered name at signing as Debra Bechtel
2025-09-24 - 10:17:55 AM GMT
-  Document e-signed by Debra Bechtel (dbechtel@teaguecampbell.com)
Signature Date: 2025-09-24 - 10:17:57 AM GMT - Time Source: server
-  Document emailed to tony.logiudice@alamancecountync.gov for signature
2025-09-24 - 10:18:00 AM GMT
-  Email viewed by tony.logiudice@alamancecountync.gov
2025-09-24 - 10:36:00 AM GMT

 Signer tony.logiudice@alamancecountync.gov entered name at signing as Tony Lo Giudice
2025-09-24 - 10:36:31 AM GMT

 Document e-signed by Tony Lo Giudice (tony.logiudice@alamancecountync.gov)
Signature Date: 2025-09-24 - 10:36:33 AM GMT - Time Source: server

 Agreement completed.
2025-09-24 - 10:36:33 AM GMT

