

REQUEST FOR BOARD ACTION

HENDERSON COUNTY BOARD OF COMMISSIONERS

MEETING DATE: February 18, 2026

SUBJECT: Department of Public Health - AA 130 Federal Grant Funding for the Management of Chronic Illness in Pregnancy

PRESENTER: G. David Jenkins, Health Director

ATTACHMENTS: Yes
1. Budget Amendment
2. Agreement Addendum

SUMMARY OF REQUEST:

The Henderson County Department of Public Health has been awarded a one-time \$12,000 AA 130 federal grant to purchase medical supplies supporting the management of hypertension, diabetes, and other identified chronic conditions during pregnancy and the postpartum period.

The Board of Health approved acceptance of this grant at its January 20, 2026 meeting and is forwarding it to the Henderson County Board of Commissioners for consideration and final approval.

BOARD ACTION REQUESTED:

The Board is requested to approve acceptance of the AA 130 Federal Grant for the Management of Chronic Illness in Pregnancy and authorize the Henderson County Department of Public Health to take the necessary budgetary actions to implement the program, subject to the funding limitations of the grant agreement.

SUGGESTED MOTION:

I move the Board approve acceptance of the AA 130 Federal Grant for the Management of Chronic Illness in Pregnancy and authorize the necessary budgetary actions, subject to the grant agreement.

Department: Public Health

Please make the following line-item transfers:

What expense line-item is to be increased?

Account	Line-Item Description	Amount
115510 523900	Medical Supplies & Equipment	\$12,000
		\$12,000

What expense line-item is to be decreased? Or what additional revenue is now expected?

[illegible]

Justification: *Please provide a brief justification for this line-item transfer request.*

To recognize AA 130 federal grant funds for the Management of Chronic Illness in Pregnancy. These funds are to be used to purchase medical supplies for uninsured patients to help support chronic issues during pregnancy and in the postpartum period. Period of performance is 1/1/2026 - 5/31/2026. BOC approved 2.18.26.

Authorized by Department Head _____ Date 2/18/2026

Authorized by Budget Office _____ Date _____

Authorized by County Manager _____ Date _____

For Budget Use Only

Batch # _____

BA # _____

Batch Date _____

Division of Public Health

Agreement Addendum

FY 25-26

Page 1 of 4

Henderson County Department of Public Health
Local Health Department Legal Name

130 Management of Chronic Illness in Pregnancy
Activity Number and Description

01/01/2026 – 05/31/2026
Service Period

02/01/2026 – 06/30/2026
Payment Period

☒ Original Agreement Addendum
☐ Agreement Addendum Revision # _____

Women, Infant, and Community Wellness Section /
Maternal Health Branch
DPH Section / Branch Name

Tara Shuler, 919-707-5708
tara.shuler@dhhs.nc.gov
DPH Program Contact
(name, phone number, and email)

DPH Program Signature **Date**
(only required for a negotiable Agreement Addendum)

I. **Background:**

The North Carolina Maternal Mortality Review Committee (MMRC) identified that 87% of pregnancy related deaths were preventable and the majority happened during pregnancy and within 42 days postpartum.¹ This is an especially vulnerable time for women with a history of chronic illness like hypertension or diabetes. One strategy to assist with detecting and diverting obstetrical emergencies early is regular monitoring of blood pressure and glucose levels by the patient outside of their scheduled appointments. For patients that are uninsured and diagnosed with hypertension and/or diabetes, there are limited options for accessing these tools outside of the clinical setting, which puts them at higher risk for severe complications.

The North Carolina Department of Health and Human Services, Division of Public Health, Women, Infant, and Community Wellness Section (DPH/WICWS) received continued funding in September 2024 from the Health Resources and Services Administration (HRSA) Maternal and Child Health Bureau (MCHB) Division of Healthy Start and Perinatal Services to administer the State Maternal Health Innovation (MHI) Program. The North Carolina MHI Program focuses on improving access to care and implementing innovative interventions to improve outcomes for populations disproportionately impacted by maternal mortality and severe maternal morbidity (SMM). Program funds will be provided to local health departments to enhance postpartum care and chronic condition management by purchasing medical supplies to support pregnant and postpartum patients in managing their hypertension, diabetes and other chronic conditions during the postpartum period.

¹ 2025, North Carolina Maternal Mortality Review Report (pp. 1–30). Raleigh, North Carolina.

D. David Jenkins
Health Director Signature (use blue ink or verifiable digital signature)

01/07/26
Date

LHD to complete: [For DPH to contact in case follow-up information is needed.]	LHD program contact name: <u>Crystal O'Dell</u> Phone and email address: <u>codell@hendersoncountync.gov 828-694-6035</u>
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Signature on this page signifies you have read and accepted all pages of this document.

Template rev. July 2022

II. Purpose:

This Agreement Addendum provides one-time funds for the Local Health Department to buy medical supplies to support the management of hypertension, diabetes, or other identified chronic issues during pregnancy and in the postpartum period. The Local Health Department will distribute these medical supplies to pregnant and postpartum women who are enrolled in maternal health services and are uninsured, for their use outside their scheduled appointments.

III. Scope of Work and Deliverables:

The Local Health Department (LHD) shall:

1. Purchase the following equipment for uninsured maternal health patients served by the LHD:
 - a. Digital blood pressure monitors and/or digital glucometers.
 1. All purchased blood pressure monitors must be able to use an extra-large or bariatric cuff attachment.
 2. All purchased glucometers should be a brand that uses test strips accessible to the patient population.
 - b. Extra-large or bariatric cuffs.
 - c. If digital glucometers are purchased, purchase compatible lancets and test strips. A three-month supply of lancets and test strips are to be provided to patients along with the glucometer.
2. Prepare and execute a plan for the LHD to distribute this medical equipment to the LHD's uninsured maternal health patients.

IV. Performance Measures / Reporting Requirements:

1. Track the number of blood pressure monitors, blood pressure cuffs, glucometers, lancets, and glucose test strips that are purchased.
2. No later than February 13, 2026, provide the DPH Program Contact (by email) with a budget and a copy of the plan for distributing the equipment described in Section III, Paragraph 2, to the LHD's uninsured maternal health patients.
3. **Monthly Financial Reports:** The monthly financial report will report on the prior month to document expenditures and is due to the DPH Program Contact (by email) by the 24th of each month. If no expenses for the prior month, the LHD will submit a zero-expense monthly financial report.
4. **Performance Report:** Using the report template provided by the DPH Program Contact, submit the report to the DPH Program Contact by email, as follows:

Reporting Interval
January – May 2026

Report Due Date
June 30, 2026

5. Reporting Required Subcontract Information

In accordance with revised NCDHHS guidelines effective October 1, 2024, the LHD must provide the information listed below for every subcontract receiving funding from the LHD to carry out any or all of this Agreement Addendum's work.

This information is not to be returned with the signed Agreement Addendum (AA) but is to be provided to DPH when the entities are known by the LHD.

- a. Subcontracts are contracts or agreements issued by the LHD to a vendor ("Subcontractor") or a pass-through entity ("Subrecipient").

1. Subcontractors are vendors hired by the LHD via a contract to provide a good or service required by the LHD to perform or accomplish specific work outlined in the executed AA. For example, if the LHD needed to build a data system to satisfy an AA's reporting requirements, the vendor hired by the LHD to build the data system would be a Subcontractor. (However, not all Vendors are considered Subcontractors. Entities performing general administrative services for the LHD (e.g., certified professional accountants) are not considered Subcontractors.)
2. Subrecipients of the LHD are those that receive DPH pass-through funding from the LHD via a contract or agreement for them to carry out all or a portion of the programmatic responsibilities outlined in the executed AA. (Subrecipients are also referred to as Subgrantees in NCAC.)

The following information must be provided to the DPH Program Contact listed on Page 1 of this AA for review prior to the entity being awarded a contract or agreement from the LHD:

- Organization or Individual's Name (if an individual, include the person's title)
- EIN or Tax ID
- Street Address or PO Box
- City, State and ZIP Code
- Contact Name
- Contact Email
- Contact Telephone
- Fiscal Year End Date (of the entity)
- State whether the entity is functioning as a pass-through entity Subcontractor or Subrecipient of the LHD.

V. Performance Monitoring and Quality Assurance:

1. The Maternal Health Branch will monitor the LHD by reviewing the distribution plan and the report detailing the equipment purchased to assess if program funds are used appropriately.
 - a. If there are adverse findings during the desk audit, the DPH Program Contact shall provide technical assistance to the LHD to address the adverse findings.
2. If the LHD is deemed out of compliance, the DPH Program Contact shall provide technical assistance, and funds may be withheld until the LHD is back in compliance with deliverables. If technical assistance does not prove beneficial, the Agreement Addendum may then be terminated.

VI. Funding Guidelines or Restrictions:

1. **Federal Funding Requirements:** where federal grant dollars received by the Division of Public Health (DPH) are passed through to the Local Health Department (LHD) for all or any part of this Agreement Addendum (AA).
 - a. Requirements for Pass-through Entities: In compliance with 2 CFR §200.331 – Requirements for pass-through entities, DPH provides Federal Award Reporting Supplements (FASs) to the LHD receiving federally funded AAs.
 1. Definition: An FAS discloses the required elements of a single federal award. FASs address elements of federal funding sources only; state funding elements will not be included in the FAS. An AA funded by more than one federal award will receive a disclosure FAS for each federal award.
 2. Frequency: An FAS will be generated as DPH receives information for federal grants. FASs will be issued to the LHD throughout the state fiscal year. For a federally funded AA, an FAS will accompany the original AA. If an AA is revised and if the revision

affects federal funds, the AA Revision will include an FAS. FASs can also be sent to the LHD even if no change is needed to an AA. In those instances, the FAS will be sent to provide newly received federal grant information for funds already allocated in the existing AA.

- b. Required Reporting Certifications: Per the revised Uniform Guidance, 2 CFR 200, if awarded federal pass-through funds, the LHD as well as all subrecipients of the LHD must certify the following whenever 1) applying for funds, 2) requesting payment, and 3) submitting financial reports:

“I certify to the best of my knowledge and belief that the information provided herein is true, complete, and accurate. I am aware that the provision of false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative consequences including, but not limited to violations of U.S. Code Title 18, Sections 2, 1001, 1343 and Title 31, Sections 3729-3730 and 3801-3812.”

FY26 - FAS Activity Nbr + Name: **130 Chronic Disease in Prenancy**
 federal award FAS Number + Reason: **1** This FAS is accompanying an AA+BE or an AA Revision+BE Revision.
 supplement Assistance Listing Nbr + Name: **93.110 Maternal and Child Health Federal Consolidated Programs**
 Is award R&D?: **no** FAIN: **U7A33712** IDC rate: **n/a** Fed awd total amt: \$ **3,000,000**
 Fed award project description: **State Maternal Health Innovation Program**
 Fed awd date + awarding agency: **08-22-25 HHS, Health Resources and Services Administration**

Subrecipient	Subrecipient's UEI	Federal funds from grant listed above	Total federal funds for entire Activity	Subrecipient	Subrecipient's UEI	Federal funds from grant listed above	Total federal funds for entire Activity
Alamance	F5VHYUU13NC5			Jackson	X7YWWY6ZP574		
Albemarle	WAAVS51PNMK3			Johnston	SYGAGEFDHYR7		
Alexander	XVEEJSNY7UX9			Jones	HE3NNNUE27M7		
Anson	PK8UYTSNJCC3			Lee	F6A8UC99JWJ5		
Appalachian	CD7BFHB8W539			Lenoir	QKUFL37VPGH6	\$ 12,000	\$ 12,000
Beaufort	RN1SXF4LXN6			Lincoln	UGGQGSSKBJ5		
Bladen	TLCTJWDJH1H9			Macon	LLPJBC6N2LL3		
Brunswick	MJBMXLN9NJT5			Madison	YQ96F8BJYTJ9		
Buncombe	W5TCDKMLHE69			MTW	ZKK5GNRNB6Y6		
Burke	KVJHUFURQDM5			Mecklenburg	EZ15XL6BMM68		
Cabarrus	RDXNEJKJFU7			Montgomery	E78ZAJM3BFL3		
Caldwell	HL4FGNJNGE97			Moore	HFNSK95FS7Z8		
Carteret	UC6WJ2MQMJS8			Nash	NF58K566HQM7		
Caswell	JDJ7Y7CGYC86			New Hanover	F7TLT2GMEJE1		
Catawba	GYUNA9W1NFM1			Northampton	CRA2KCAL8BA4		
Chatham	KE57QE2GV5F1			Onslow	EGE7NBXW5JS6		
Cherokee	DCEGK6HA11M5			Orange	GFFMCW9XDA53		
Clay	HYKLQVNLXK7			Pamlico	FT59QFEAU344		
Cleveland	UWMUYMPVL483			Pender	T11BE678U9P5		
Columbus	V1UAJ4L87WQ7			Person	FQ8LFJGMABJ4		
Craven	LTZ2U8LZQ214			Pitt	VZNPMLCFT5R6		
Cumberland	HALND8WJ3GW4			Polk	QZ6BZPGLX4Y9		
Dare	ELV6JGB11QK6			Randolph	T3BUM1CVS9N5		
Davidson	C9P5MDJC7KY7			Richmond	Q63FZNTJM3M4		
Davie	L8WBGLHZV239			Robeson	LKBEJQFLAAK5		
Duplin	KZN4GK5262K3	\$ 12,000	\$ 12,000	Rockingham	KGCCCHJJZZ43		
Durham	LJ5BA6U2HLM7			Rowan	GCB7UCV96NW6		
Edgecombe	MAN4LX44AD17			Sampson	WRT9CSK1KJY5		
Foothills	NGTEF2MQ8LL4			Scotland	FNVTUCUQGCHM5		
Forsyth	V6BGVQ67YPY5			Stanly	U86MZUYPL7C5		
Franklin	FFKTRQCNN143			Stokes	W41TRA3NUNS1	\$ 10,000	\$ 10,000
Gaston	QKY9R8A8D5J6			Surry	FMWCTM24C9J8		
Graham	L8MAVKQJTYN7			Swain	TAE3M92L4QR4		
Granv-Vance	MGQJJK22EJB3			Toe River	JUA6GAUQ9UM1		
Greene	VCU5LD71N9U3			Transylvania	YLN4BFCJCP39		
Guilford	YBEQWGFJPMJ3			Union	LHMKBD4AGRJ5		
Halifax	MRL8MYNJ3Y5			Wake	FTJ2WJPLWMJ3		
Harnett	JBDCD9V41BX7			Warren	TLNAU5CNHSU5		
Haywood	DQHZEAV95G5			Wayne	DACFHCLQKMS1		
Henderson	TG5AR81JLFQ5	\$ 12,000	\$ 12,000	Wilkes	M14KKHY2NNR3		
Hoke	C1GWSADARX51			Wilson	ME2DJHMYWG55		
Hyde	T2RSYN36NN64			Yadkin	PLCDT7JFA8B1		
Iredell	XTNRLKJLA4S9			Yancey	L98MCUHKC2J8		

DPH-Aid-To-Counties

For Fiscal Year: 25/26

Budgetary Estimate Number : 0

Activity 130	AA	133000 2B15880 20G0063001	Total Allocated	Proposed Total	New Total
Service Period		01/01-05/31			
Payment Period		02/01-06/30			
01 Alamance		0	\$0.00	0	0
D1 Albemarle		0	\$0.00	0	0
02 Alexander		0	\$0.00	0	0
04 Anson		0	\$0.00	0	0
D2 Appalachian		0	\$0.00	0	0
07 Beaufort		0	\$0.00	0	0
09 Bladen		0	\$0.00	0	0
10 Brunswick		0	\$0.00	0	0
11 Buncombe		0	\$0.00	0	0
12 Burke		0	\$0.00	0	0
13 Cabarrus		0	\$0.00	0	0
14 Caldwell		0	\$0.00	0	0
16 Carteret		0	\$0.00	0	0
17 Caswell		0	\$0.00	0	0
18 Catawba		0	\$0.00	0	0
19 Chatham		0	\$0.00	0	0
20 Cherokee		0	\$0.00	0	0
22 Clay		0	\$0.00	0	0
23 Cleveland		0	\$0.00	0	0
24 Columbus		0	\$0.00	0	0
25 Craven		0	\$0.00	0	0
26 Cumberland		0	\$0.00	0	0
28 Dare		0	\$0.00	0	0
29 Davidson		0	\$0.00	0	0
30 Davie		0	\$0.00	0	0
31 Duplin	* 0	12,000	\$0.00	12,000	12,000
32 Durham		0	\$0.00	0	0
33 Edgecombe		0	\$0.00	0	0
D7 Foothills		0	\$0.00	0	0
34 Forsyth		0	\$0.00	0	0
35 Franklin		0	\$0.00	0	0
36 Gaston		0	\$0.00	0	0
38 Graham		0	\$0.00	0	0
D3 Gran-Vance		0	\$0.00	0	0
40 Greene		0	\$0.00	0	0
41 Guilford		0	\$0.00	0	0
42 Halifax		0	\$0.00	0	0
43 Harnett		0	\$0.00	0	0
44 Haywood		0	\$0.00	0	0
45 Henderson	* 0	12,000	\$0.00	12,000	12,000
47 Hoke		0	\$0.00	0	0
48 Hyde		0	\$0.00	0	0
49 Iredell		0	\$0.00	0	0
50 Jackson		0	\$0.00	0	0

51 Johnston		0	\$0.00	0	0
52 Jones		0	\$0.00	0	0
53 Lee		0	\$0.00	0	0
54 Lenoir	* 0	12,000	\$0.00	12,000	12,000
55 Lincoln		0	\$0.00	0	0
56 Macon		0	\$0.00	0	0
57 Madison		0	\$0.00	0	0
D4 M-T-W		0	\$0.00	0	0
60 Mecklenburg		0	\$0.00	0	0
62 Montgomery		0	\$0.00	0	0
63 Moore		0	\$0.00	0	0
64 Nash		0	\$0.00	0	0
65 New Hanover		0	\$0.00	0	0
66 Northampton		0	\$0.00	0	0
67 Onslow		0	\$0.00	0	0
68 Orange		0	\$0.00	0	0
69 Pamlico		0	\$0.00	0	0
71 Pender		0	\$0.00	0	0
73 Person		0	\$0.00	0	0
74 Pitt		0	\$0.00	0	0
75 Polk		0	\$0.00	0	0
76 Randolph		0	\$0.00	0	0
77 Richmond		0	\$0.00	0	0
78 Robeson		0	\$0.00	0	0
79 Rockingham		0	\$0.00	0	0
80 Rowan		0	\$0.00	0	0
82 Sampson		0	\$0.00	0	0
83 Scotland		0	\$0.00	0	0
84 Stanly		0	\$0.00	0	0
85 Stokes	* 0	10,000	\$0.00	10,000	10,000
86 Surry		0	\$0.00	0	0
87 Swain		0	\$0.00	0	0
D6 Toe River		0	\$0.00	0	0
88 Transylvania		0	\$0.00	0	0
90 Union		0	\$0.00	0	0
92 Wake		0	\$0.00	0	0
93 Warren		0	\$0.00	0	0
96 Wayne		0	\$0.00	0	0
97 Wilkes		0	\$0.00	0	0
98 Wilson		0	\$0.00	0	0
99 Yadkin		0	\$0.00	0	0
00 Yancey		0	\$0.00	0	0
Totals		46,000	0	46,000	46,000

Sign and Date - DPH Program Administrator <i>Tara Owens Shuler</i> 12/03/25 12:08 PM EST	Sign and Date - DPH Section Chief <i>Belinda Pettiford</i> 12/03/25 9:32 AM PST
Sign and Date - DPH Budget Office - ATC Coordinator <i>Sammy Ruffin</i> 12/3/2025	Sign and Date - DPH Budget Officer <i>April Johnson</i> 12/4/2025

PW