

SLFRF Compliance Report - SLT-0589-P&E Report-Q4 2022
Report Period : Quarter 4 2022 (October-December)

Recipient Profile

Recipient Information

Recipient UEI	M3EYGYK6H4K7
Recipient TIN	166002563
Recipient Legal Entity Name	County Of Monroe, New York
Recipient Type	Metro City or County
FAIN	
CFDA No./Assistance Listing	
Recipient Address	39 W. Main Street
Recipient Address 2	
Recipient Address 3	
Recipient City	Rochester
Recipient State/Territory	NY
Recipient Zip5	14614
Recipient Zip+4	
Recipient Reporting Tier	Tier 1. States, U.S. territories, metropolitan cities and counties with a population that exceeds 250,000 residents
Base Year Fiscal Year End Date	12/31/2022
Discrepancies Explanation	
Who approves the budget in your jurisdiction?	Legislature
Is your budget considered executed at the point of obligation?	Yes
Is the Recipient Registered in SAM.Gov?	Yes

Project Overview

Project Name: Transformational Community Care Coordination (TC3)

Project Identification Number	730002157
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.14-Other Public Health Services
Status To Completion	Not Started
Adopted Budget	\$5,000,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$5,000,000.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$5,000,000.00
Current Period Expenditures	\$0.00
Project Description	The Transformational Community Care Coordination (TC3) project seeks to address a public health crisis and transform the healthcare delivery system for persons with long-term care needs. Workforce development is a focus and there are two related components: Long Term Care (LTC) Workforce Program and Transforming Lives through Nursing Pathways (the Pathways). The LTC Workforce Program addresses the critical workforce shortages in Skilled Nursing Facilities (SNFs) through recruitment, training, and retention activities. The Pathways expands and strengthens clinical programming at Monroe Community College (MCC) to serve more students and provide career advancement opportunities in the healthcare sector.

Project Name: Bring Monroe Back Admin

Project Identification Number	Admin 01
Project Expenditure Category	7-Administrative
Project Expenditure Subcategory	7.1-Administrative Expenses
Status To Completion	Completed less than 50%
Adopted Budget	\$1,000,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$1,000,000.00
Total Cumulative Expenditures	\$79,749.89
Current Period Obligations	\$1,000,000.00
Current Period Expenditures	\$79,749.89
Project Description	Administration/Salary costs for 2 full-time staff to administer ARPA grants.

Project Name: Monroe County Vaccinations

Project Identification Number	58010901.1.1
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.1-COVID-19 Vaccination
Status To Completion	Completed less than 50%
Adopted Budget	\$20,000,000.00
Program Income Earned	\$0.00
Program Income Expended	\$0.00
Total Cumulative Obligations	\$9,198,766.51
Total Cumulative Expenditures	\$7,893,953.88
Current Period Obligations	\$1,150,442.69
Current Period Expenditures	\$1,050,192.69
Project Description	Vaccinate all eligible county citizens to prevent further spread of COVID-19 and improve community health.
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	1 Imp General Public
Secondary Impacted and/or Disproportionately Impacted populations	2 Imp Low or moderate income HHs or populations
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	Provide vaccinations to all Monroe County Citizens through the use of three fixed locations and several mobile clinic vehicles to homebound individuals. Use community ambassadors to serve underrepresented communities more negatively impacted by the pandemic. All actions are intended to address the covid 19 harms and mitigation of further harm. Monroe County seeks to achieve a 100% vaccination rate in the County.
Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19	The County used community ambassadors, advocates and liaisons and leaders to develop relationships and trust between the vaccination providers and the populations most vulnerable to serious health issues. The primary focus was to reach directly into disadvantaged neighborhoods.

Subrecipients

Subrecipient Name: Finger Lakes Performing Provider System

TIN	
Unique Entity Identifier	KE97ANJYCL65
POC Email Address	
Address Line 1	1 S. Washington St., Suite 200
Address Line 2	
Address Line 3	
City	Rochester
State	NY
Zip	14614
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: New York State Industries for the Disabled

TIN	
Unique Entity Identifier	RSPZLISJPYD2
POC Email Address	
Address Line 1	11 Columbia Circle Dr.
Address Line 2	
Address Line 3	
City	Albany
State	NY
Zip	12203
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: HCCO, Inc.

TIN	203745855
Unique Entity Identifier	GJDCLJDDYJP5
POC Email Address	
Address Line 1	594 Van Alstyne Rd
Address Line 2	
Address Line 3	
City	Webster

State	NY
Zip	14580
Zip+4	
Entity Type	Contractor
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: Goodwill of the Finger Lakes Inc

TIN	274212702
Unique Entity Identifier	ybv dq l j z u n u 1
POC Email Address	
Address Line 1	422 South Clinton Ave
Address Line 2	
Address Line 3	
City	Rochester
State	NY
Zip	14620
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: W B Mason Company Inc

TIN	042455641
Unique Entity Identifier	k7u g u n 3 q k n n 5
POC Email Address	
Address Line 1	PO Box 981101
Address Line 2	
Address Line 3	
City	Boston
State	MA
Zip	02298
Zip+4	
Entity Type	Contractor
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: Prem Pro LLC

TIN	464492062
Unique Entity Identifier	
POC Email Address	
Address Line 1	8483 Apple Falls Lane

Address Line 2	
Address Line 3	
City	Boca Raton
State	FL
Zip	33076
Zip+4	
Entity Type	Contractor
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: Allstate Medical Supplies

TIN	113529776
Unique Entity Identifier	jauzxcmmf4
POC Email Address	
Address Line 1	34 35th Street
Address Line 2	
Address Line 3	
City	Brooklyn
State	NY
Zip	11232
Zip+4	
Entity Type	Contractor
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: Finger Lakes Health Systems Agency Common Ground Health

TIN	161061456
Unique Entity Identifier	tkzcyekzxm79
POC Email Address	
Address Line 1	1150 University Ave
Address Line 2	
Address Line 3	
City	Rochester
State	NY
Zip	14607
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: University of Rochester Medical Center

TIN	160743209
Unique Entity Identifier	
POC Email Address	
Address Line 1	601 Elmwood Ave
Address Line 2	Box 614
Address Line 3	
City	Rochester
State	NY
Zip	14642
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	Yes

Subrecipient Name: McCarthy Tents and Events

TIN	352309479
Unique Entity Identifier	dg3euapluy6
POC Email Address	
Address Line 1	3353 Brighton-Henrietta Town Line Rd
Address Line 2	
Address Line 3	
City	Rochester
State	NY
Zip	14623
Zip+4	
Entity Type	Contractor
Is the Recipient Registered in SAM.Gov?	Yes
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: Mortuary Response Solutions Inc

TIN	203168298
Unique Entity Identifier	
POC Email Address	
Address Line 1	4102 Highway 29 North
Address Line 2	
Address Line 3	

City	Belton
State	SC
Zip	29627
Zip+4	
Entity Type	Contractor
Is the Recipient Registered in SAM.Gov?	No
In the preceding fiscal year, did recipient receive 80% or more of its annual gross revenue from federal funds?	No
In the preceding fiscal year, did recipient receive \$25 million or more of its annual gross revenue from federal funds?	No

Subrecipient Name: University of Rochester Medical Center Pediatrics

TIN	160743209
Unique Entity Identifier	
POC Email Address	
Address Line 1	601 Elmwood Ave
Address Line 2	Box 635
Address Line 3	
City	Rochester
State	NY
Zip	14642
Zip+4	
Entity Type	Subrecipient
Is the Recipient Registered in SAM.Gov?	Yes

Subawards

Subaward No: 730002157

Subaward Type	Contract: Purchase Order
Subaward Obligation	\$5,000,000.00
Subaward Date	12/31/2022
Place of Performance Address 1	1 S. Washington St., Suite 200
Place of Performance Address 2	1 S. Washington St., Suite 200
Place of Performance Address 3	
Place of Performance City	Rochester
Place of Performance State	NY
Place of Performance Zip	14614
Place of Performance Zip+4	
Description	The Transformational Community Care Coordination (TC3) project seeks to address a public health crisis and transform the healthcare delivery system for persons with long-term care needs. Workforce development is a focus and there are two related components: Long Term Care (LTC) Workforce Program and Transforming Lives through Nursing Pathways (the Pathways). The LTC Workforce Program addresses the critical workforce shortages in Skilled Nursing Facilities (SNFs) through recruitment, training, and retention activities. The Pathways expands and strengthens clinical programming at Monroe Community College (MCC) to serve more students and provide career advancement opportunities in the healthcare sector.
Subrecipient	Finger Lakes Performing Provider System
Period of Performance Start	1/31/2023
Period of Performance End	12/31/2026

Subaward No: 740005743

Subaward Type	Contract: Purchase Order
Subaward Obligation	\$100,250.00
Subaward Date	4/6/2022
Place of Performance Address 1	111 Westfall Road
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Rochester
Place of Performance State	NY
Place of Performance Zip	14620
Place of Performance Zip+4	
Description	Data entry services for insurance information related to covid vaccinations.

Subrecipient	New York State Industries for the Disabled
Period of Performance Start	4/6/2022
Period of Performance End	4/5/2023

Subward No: 7300000923

Subaward Type	Contract: Purchase Order
Subaward Obligation	\$285,000.00
Subaward Date	1/2/2022
Place of Performance Address 1	145 Paul Road
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Rochester
Place of Performance State	NY
Place of Performance Zip	14614
Place of Performance Zip+4	
Description	Computer help desk support at vaccination pods.
Subrecipient	HCCO, Inc.
Period of Performance Start	1/2/2022
Period of Performance End	12/31/2023

Subward No: 7300000536

Subaward Type	Contract: Purchase Order
Subaward Obligation	\$230,900.00
Subaward Date	5/21/2021
Place of Performance Address 1	601 Elmwood Ave
Place of Performance Address 2	Box 635
Place of Performance Address 3	
Place of Performance City	Rochester
Place of Performance State	NY
Place of Performance Zip	14642
Place of Performance Zip+4	
Description	Covid 19 medical consulting
Subrecipient	University of Rochester Medical Center Pediatrics
Period of Performance Start	5/21/2021
Period of Performance End	4/30/2022

Subward No: 7300000575

Subaward Type	Contract: Purchase Order
Subaward Obligation	\$61,202.20

Subaward Date	6/11/2021
Place of Performance Address 1	601 Elmwood Ave
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Rochester
Place of Performance State	NY
Place of Performance Zip	14642
Place of Performance Zip+4	
Description	Medical support for Covid 19 vaccination distribution.
Subrecipient	University of Rochester Medical Center
Period of Performance Start	6/11/2021
Period of Performance End	6/30/2021

Subaward No: 740005159

Subaward Type	Contract: Purchase Order
Subaward Obligation	\$275,000.00
Subaward Date	1/14/2022
Place of Performance Address 1	111 Westfall Rd
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Rochester
Place of Performance State	NY
Place of Performance Zip	14620
Place of Performance Zip+4	
Description	Purchase of N95 Face Masks
Subrecipient	W B Mason Company Inc
Period of Performance Start	1/14/2022
Period of Performance End	1/24/2022

Subaward No: 740005012

Subaward Type	Contract: Purchase Order
Subaward Obligation	\$799,204.30
Subaward Date	12/6/2021
Place of Performance Address 1	111 Westfall Rd
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Rochester
Place of Performance State	NY
Place of Performance Zip	14620

Place of Performance Zip+4	
Description	Purchase of binaxnow covid test kits.
Subrecipient	Allstate Medical Supplies
Period of Performance Start	12/6/2021
Period of Performance End	3/22/2022

Subward No: 7400005093

Subaward Type	Contract: Purchase Order
Subaward Obligation	\$3,040,180.00
Subaward Date	1/11/2022
Place of Performance Address 1	111 Westfall Rd
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Rochester
Place of Performance State	NY
Place of Performance Zip	14620
Place of Performance Zip+4	
Description	Purchase of IHealth Covid 19 Antigen Rapid test kits.
Subrecipient	Prem Pro LLC
Period of Performance Start	1/11/2022
Period of Performance End	2/17/2022

Subward No: 7300000576

Subaward Type	Contract: Purchase Order
Subaward Obligation	\$150,000.00
Subaward Date	5/1/2021
Place of Performance Address 1	422 South Clinton Ave
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Rochester
Place of Performance State	NY
Place of Performance Zip	14620
Place of Performance Zip+4	
Description	Distribution of vaccinations for homebound residents.
Subrecipient	Goodwill of the Finger Lakes Inc
Period of Performance Start	5/1/2021
Period of Performance End	12/31/2021

Subward No: 7400005013

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Subaward Type	Contract: Purchase Order
Subaward Obligation	\$75,950.00
Subaward Date	12/8/2021
Place of Performance Address 1	740 East Henrietta Rd
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Rochester
Place of Performance State	NY
Place of Performance Zip	14623
Place of Performance Zip+4	
Description	Purchase of mortuary refrigerated remains trailer.
Subrecipient	Mortuary Response Solutions Inc
Period of Performance Start	12/8/2021
Period of Performance End	4/6/2022

Subward No: 7400004722

Subaward Type	Contract: Purchase Order
Subaward Obligation	\$57,479.25
Subaward Date	1/1/2022
Place of Performance Address 1	145 Paul Rd
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Rochester
Place of Performance State	NY
Place of Performance Zip	14624
Place of Performance Zip+4	
Description	Rental of large outdoor tents to support the distribution of covid vaccinations.
Subrecipient	McCarthy Tents and Events
Period of Performance Start	1/1/2022
Period of Performance End	7/31/2022

Subward No: 7300000577

Subaward Type	Contract: Purchase Order
Subaward Obligation	\$63,554.36
Subaward Date	6/1/2021
Place of Performance Address 1	1150 University Ave
Place of Performance Address 2	
Place of Performance Address 3	

Place of Performance City	Rochester
Place of Performance State	NY
Place of Performance Zip	14607
Place of Performance Zip+4	
Description	Agency served as a vaccine ambassador to reach unrepresented populations.
Subrecipient	Finger Lakes Health Systems Agency Common Ground Health
Period of Performance Start	6/1/2021
Period of Performance End	3/31/2022

Expenditures

Expenditures for Awards more than \$50,000

Expenditure: EN-00602484

Project Name	Monroe County Vaccinations
Subaward ID	SUB-0428158
Subaward No	7300000923
Subaward Amount	\$285,000.00
Subaward Type	Contract: Purchase Order
Subrecipient Name	HCCO, Inc.
Expenditure Start	1/2/2022
Expenditure End	9/30/2022
Expenditure Amount	\$26,170.75

Expenditure: EN-00622604

Project Name	Monroe County Vaccinations
Subaward ID	SUB-0440231
Subaward No	7300000536
Subaward Amount	\$230,900.00
Subaward Type	Contract: Purchase Order
Subrecipient Name	University of Rochester Medical Center Pediatrics
Expenditure Start	11/1/2021
Expenditure End	3/31/2022
Expenditure Amount	\$108,460.17

Expenditure: EN-00622607

Project Name	Monroe County Vaccinations
Subaward ID	SUB-0440245
Subaward No	7300000575
Subaward Amount	\$61,202.20
Subaward Type	Contract: Purchase Order
Subrecipient Name	University of Rochester Medical Center
Expenditure Start	6/11/2021
Expenditure End	6/30/2021
Expenditure Amount	\$61,202.20

Expenditure: EN-00623880

Project Name	Monroe County Vaccinations
Subaward ID	SUB-0440248
Subaward No	7400005159
Subaward Amount	\$275,000.00
Subaward Type	Contract: Purchase Order
Subrecipient Name	W B Mason Company Inc
Expenditure Start	1/14/2022
Expenditure End	1/24/2022
Expenditure Amount	\$275,000.00

Expenditure: EN-00623883

Project Name	Monroe County Vaccinations
Subaward ID	SUB-0440257
Subaward No	7400005093
Subaward Amount	\$3,040,180.00
Subaward Type	Contract: Purchase Order
Subrecipient Name	Prem Pro LLC
Expenditure Start	1/11/2022
Expenditure End	2/17/2022
Expenditure Amount	\$3,040,180.00

Expenditure: EN-00623884

Project Name	Monroe County Vaccinations
Subaward ID	SUB-0440317
Subaward No	7300000576
Subaward Amount	\$150,000.00
Subaward Type	Contract: Purchase Order
Subrecipient Name	Goodwill of the Finger Lakes Inc
Expenditure Start	5/1/2021
Expenditure End	12/31/2021
Expenditure Amount	\$150,000.00

Expenditure: EN-00623885

Project Name	Monroe County Vaccinations
Subaward ID	SUB-0440325

Subaward No	7400005013
Subaward Amount	\$75,950.00
Subaward Type	Contract: Purchase Order
Subrecipient Name	Mortuary Response Solutions Inc
Expenditure Start	12/8/2021
Expenditure End	4/6/2022
Expenditure Amount	\$75,950.00

Expenditure: EN-00623886

Project Name	Monroe County Vaccinations
Subaward ID	SUB-0440333
Subaward No	7400004722
Subaward Amount	\$57,479.25
Subaward Type	Contract: Purchase Order
Subrecipient Name	McCarthy Tents and Events
Expenditure Start	1/1/2022
Expenditure End	7/31/2022
Expenditure Amount	\$33,400.00

Expenditure: EN-00623888

Project Name	Monroe County Vaccinations
Subaward ID	SUB-0440339
Subaward No	7300000577
Subaward Amount	\$63,554.36
Subaward Type	Contract: Purchase Order
Subrecipient Name	Finger Lakes Health Systems Agency Common Ground Health
Expenditure Start	6/1/2021
Expenditure End	3/31/2022
Expenditure Amount	\$63,544.36

Aggregate Expenditures for Awards less than \$50,000

Expenditure: EN-00894535

Project Name	Bring Monroe Back Admin
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$79,749.89
Total Period Obligation Amount	\$1,000,000.00

Expenditure: EN-00894464

Project Name	Monroe County Vaccinations
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$1,050,192.69
Total Period Obligation Amount	\$1,050,192.69

Expenditure: EN-00648676

Project Name	Monroe County Vaccinations
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$3,009,853.71
Total Period Obligation Amount	\$3,009,853.71

Report

Revenue Replacement

Is your jurisdiction electing to use the standard allowance of up to \$10 million, not to exceed your total award allocation, for identifying revenue loss?	Yes
Revenue Loss Due to Covid-19 Public Health Emergency	\$0.00
Were Fiscal Recovery Funds used to make a deposit into a pension fund?	No
Please provide an explanation of how revenue replacement funds were allocated to government services	Monroe County is not electing to spend funds on revenue replacement in fiscal year 2022.

Overview

Total Obligations	\$15,198,766.51
Total Expenditures	\$7,973,703.77
Total Adopted Budget	\$26,000,000.00
Total Number of Projects	3
Total Number of Subawards	12
Total Number of Expenditures	12

Certification

Authorized Representative Name	Rebecca Case-Caico
Authorized Representative Telephone	(585) 753-2005
Authorized Representative Title	Deputy Planning Director
Authorized Representative Email	rebeccacaico@monroecounty.gov
Submission Date	1/30/2023 10:13 AM