WHATCOM COUNTY CONTRACT INFORMATION SHEET

Whatcom County Contract Number: 201808030 – 3

Originating Department:					85 Health							
Division/Program: (i.e. Dept. Division and Program)					8550 Human Services / 855020 Mental Health							
Contract or Grant Administrator:					Anne Deacon							
Contractor's / Agency Name:					SeaMar							
Is this a New Contract? If not, is this an Amendment or Renewal to an Existing Co Yes □ No ☑ If Amendment or Renewal, (per WCC 3.08.100 (a)) Or											No 🗆	
Does contract require Council Approval? Yes ⊠ No □						If No, include WCC:						
Already approved? Council Approved Date: (Exclusions see: Whatcom County Codes 3.06.010, 3.08.090 and 3.08.100)												
Is this a grant agreement?												
Yes □ No D		If yes, grant	or age	ncv co	ontract nur	nber(s): CFDA			CFDA#:			
		, , ,						т —	,)			
Is this contract grant funded? Yes ⊠ No □ If yes, Whatcom County grant contract number(s): 202006007 / 201902019												
Is this contract the re	sult of a REP	or Rid proces	27	T	T			Contra	ct Cost	671	1200 /	
Yes 🛭 No [RFP and Bid		or(e)	18-1	1		Center		t Cost 671200 / 124100/675700		
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Is this agreement exc	cluded from E	-Verify?	No		Yes ⊠	If no, include	e Attachm	ent D Co	ntractor D	eclar	ation form.	
If YES, indicate exclus	ion(s) below:											
			ied/lic	ensed	profession	nal.						
☐ Contract work is	for less than \$	100,000.								elf items (COTS).		
☐ Contract work is						☐ Work related subcontract less than \$25,000.						
☐ Interlocal Agreen	nent (between	Government	s).			☐ Public Wo	rks - Loca	Agency/	Federally	Fund	ded FHWA.	
Contract Amount:(sum	of original co	ntract amount	and	Cou	ncil approva	al required for; all	property lea	ases, contr	acts or bid	awar	ds exceedin o	\$40,000.
any prior amendments						al service contract						
\$ 1,113,161.31	<i>(</i> :		T	10%		amount, whichev						
This Amendment Amo	unt:			1.		an option contain						
\$ 506,546.46				2.		for design, const by council in a cap					es, or otner ca	pitai costs
Total Amended Amour	nt:		-	3.			ollai buugei	. арргорпа	uori oiulia	nce.		
State Amended Amount: 3. Bid or award is for supplies. 4. Equipment is included in Exhibit "B" of the Budget Ordinance												
4. Equipment's included in Exhibit B of the Budget Ordinarice 5. Contract is for manufacturer's technical support and hardware maintenance of el						electronic						
systems and/or technical support and software maintenance from the developer of							r of					
						software current						
Summary of Scope: T												
designed to provide int	ensive care c	oordination se	rvices	to ind	ividuals w	no frequently us	e the crisi	s system	and law e	ntorc	cement respo	onses in
ineffective ways.												
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Term of Contract:	Tear Prepared	hu:	Т	JT		Expiration Dat	e.	12/31/20	Date:	11	/04/2020	
Contract Routing:		-							Date:		/09/20 / 11/0	16/20
	Health Budget Approval Attorney signoff:			KR/JG			Date:	_		10/20		
	Attorney signoff: AS Finance reviewed: M Caldwell AS Finance reviewed: M Caldwell							Date:	11/13/2020 11/10/2020			
	5. IT reviewed (if IT related):							Date:	11	11012020		
	6. Contractor signed:							Date:	1			
	7. Submitted to Exec.: JT							Date:	11	/30/2020		
	8. Council approved (if necessary): AB2020-				-550			Date:	-	/24/2020		
	9. Executive signed:								Date:	†	12-01-	7070
	10. Original to Council:					V			Date:		12-7-2	

WHATCOM COUNTY Health Department



Erika Lautenbach, Director Greg Stern, M.D., Health Officer

MEMORANDUM

TO:

Satpal Sidhu, County Executive

FROM:

Erika Lautenbach, Director

RE:

SeaMar – GRACE Program Contract Amendment #3

DATE:

November 30, 2020

Attached is a contract amendment between Whatcom County and SeaMar for your review and signature.

Background and Purpose

Whatcom Ground-level Response and Coordinated Engagement (GRACE) is a multi-agency, cross-system program that provides intensive care coordination to individuals who have frequent contact with law enforcement and emergency response systems, make inappropriate use of health care, and have failed social service and housing episodes, leading to inefficient use of public resources to meet their needs. The goal of GRACE is to increase public safety, reduce excessive use and cost to emergency and criminal justice systems, and improve the health and well-being of individuals with complex needs. SeaMar facilitates the GRACE program and works closely with community partners and various systems to provide care coordination to individuals in the program. The purpose of this amendment is to renew the contract for an additional year.

Funding Amount and Source

Funding for this contract, in an amount not to exceed \$506,546.46, is provided by the Behavioral Health Program Fund, the City of Bellingham, PeaceHealth Medical Center, and the North Sound Behavioral Health Administrative Services Organization Trueblood Fund. These funds will be included in the 2021 budget. Council approval is required as funding for this amendment will exceed 10% of the approved budget.

Please contact Kathleen Roy at extension #6007 if you have any questions regarding this agreement.

Encl.





Whatcom County Contract Number:

201808030 - 3

WHATCOM COUNTY CONTRACT AMENDMENT

PARTIES:

Whatcom County
Whatcom County Health Department
509 Girard Street

AND CONTRACTOR: SeaMar Community Health Center 1040 S Henderson Street Seattle, WA 98108

AMENDMENT NUMBER: 3 CONTRACT PERIODS:

Bellingham, WA 98225

Original: Amendment #1:

09/01/2018 - 12/31/2019 01/01/2019 - 12/31/2019 Amendment #2: 01/01/2020 – 12/31/2020 Amendment #3: 01/01/2021 – 12/31/2021

THE CONTRACT IDENTIFIED HEREIN, INCLUDING ANY PREVIOUS AMENDMENTS THERETO, IS HEREBY AMENDED AS SET FORTH IN THE DESCRIPTION OF THE AMENDMENT BELOW BY MUTUAL CONSENT OF ALL PARTIES HERETO

DESCRIPTION OF AMENDMENT:

- 1. Extend the duration and other terms of this contract for 1 year, as per the original contract "General Terms, Section 10.2, Extension".
- 2. Amend Exhibit A Scope of Work, to update Section IV Program Requirements (A) to update 2021 staffing requirements.
- 3. Amend Exhibit B Compensation, to reflect the 2021 budget; revised Exhibit B is attached.
- 4. Add Exhibit D Client Service Support Guidelines
- 5. Funding for this contract period (01/01/2021 12/31/2021) is not to exceed \$506,546.46.
- 6. Funding for the total contract period (09/01/2018 12/31/2021) is not to exceed \$1,619,708.
- 7. All other terms and conditions remain unchanged.
- 8. The effective start date of the amendment is 01/01/2021.



ALL OTHER TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND ANY PREVIOUS AMENDMENTS THERETO REMAIN IN FULL FORCE AND EFFECT. ALL PARTIES IDENTIFIED AS AFFECTED BY THIS AMENDMENT HEREBY ACKNOWLEDGE AND ACCEPT THE TERMS AND CONDITIONS OF THIS AMENDMENT. Signature is required below.

APPROVAL AS TO PROGRAM:	proved by email AD/JT	11/05/2020
	Anne Deacon, Human Services Manager	Date
DEPARTMENT HEAD APPROVAL:	Enkefantenback	11/24/2020
	Erika Lautenbach, Health Department Directo	or Date
APPROVAL AS TO FORM:	ed by email RB/JT	11/13/2020
Royce	Buckingham, Prosecuting Attorney	Date
FOR THE CONTRACTOR: Contractor Signature	Rogelio Riojas, Print Name and T	CEO 11/23/20 Date
STATE OF WASHINGTON)		
COUNTY OF KING)	4 8	
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NOTARY PUBLIC Residing at	nand for the State of Washington 8-2023	NOTARY PUBLIC Number of WASHILLING
FOR WHATCOM COUNTY:	dle	10 11 0 7
Satpal Singh Sighu, County Exe	cutive	12-01-2020 Date
STATE OF WASHINGTON)		
COUNTY OF WHATCOM)		
	y of <u>December</u> , 2020, before	me personally appeared Satpal Singh Sidhu, to me
known to be the Executive of Whate	com County and who executed the above ins	strument and who acknowledged to me the act of
signing and sealing thereof.		
NOTARY PUBLIC Residing at Bellingh My Commission expires: 12 HL_010121_SeaMar_GRACE_Amend_#3.docx		Page 2 of 7

Exhibit "A" – Amendment #3 (SCOPE OF WORK)

Background

Individuals with complex needs are often challenged with poor health, behavioral health disorders, and/or unstable housing or homelessness. As a result, some individuals will frequently require emergency responses from law enforcement or Emergency Medical Services (EMS). Crisis interventions are ineffective in resolving an individual's persistent challenges. These individuals become "familiar faces" to first responder systems and require substantial support to change the pattern of excessive and inappropriate use. A thoughtful intervention plan that includes multiple service providers who coordinate their efforts can help prevent or reduce unnecessary calls to First Responders.

Whatcom GRACE (Ground-level Response And Coordinated Engagement) is a program designed to provide intensive care coordination services to individuals who frequently use the crisis system and law enforcement responses in ineffective ways. Care coordination activities are coupled with other necessary services from relevant service providers to create comprehensive intervention and care plans. The overarching GRACE program goals are to reduce First Responder calls, Emergency Department visits, arrests, and jail admissions while improving the health, well-being and stability of these individuals.

The general goals of the GRACE program are: 1) increased public safety, 2) reduced use and costs of emergency and criminal justice systems, and 3) improved health and well-being of individuals with complex needs.

GRACE community partners include, but are not necessarily limited to: the Whatcom County Health Department, the City of Bellingham, PeaceHealth Medical Center, law enforcement agencies, Emergency Medical Services (EMS), the Whatcom County Jail, small cities, tribal nations, and treatment and housing providers.

The purpose of this contract is to fund an agency to act as the Hub in a "hub and spoke" model, with the above-mentioned community partners serving as the "spokes". The Hub agency will facilitate the development of Community Support Plans and provide care coordination and case management services to an identified population of "familiar faces" in collaboration with "spoke" partners.

II. Definitions

<u>Hub:</u> The agency/contractor that identifies program participants, and facilitates and/or provides GRACE member engagement, intervention planning, care coordination, and program quality assurance for GRACE. The Hub will provide leadership to the community and its partners in its primary responsibility for administration of the county-wide GRACE Program.

<u>Executive Committee:</u> Representatives from the funding entities, acting in an advisory capacity to the county and the Hub/contractor, providing guidance on goals and objectives, and expected outcomes of the GRACE program.

<u>Familiar Faces:</u> Individuals who use crisis systems frequently and ineffectively, often without meeting their unique, complex needs.

<u>Leadership Team:</u> An identified group of community leaders acting in an advisory capacity to the County and the Hub/Contractor on policies of the GRACE program.

<u>Program Team:</u> An identified group of community service providers, comprised largely of "spoke" organizations at the program level acting in an advisory capacity to the County and the Contractor/Hub on GRACE practices and procedures.

<u>Spokes:</u> Spokes are the organizations that provide services to GRACE members and coordinate care, to include behavioral health treatment, housing and other social services, and medical care.

III. Statement of Work

A. Program Services

The Contractor will serve as the Hub for the GRACE program. The role of the Hub is to facilitate comprehensive care coordination among spoke agencies that are providing services to GRACE members, provide direct care coordination and case management, facilitate the development of Community Support Plans, and report on identified performance and outcome measures.

Specific responsibilities of the Hub include:

- 1. Maintain staff capacity to operate the GRACE Hub, in collaboration with the County and other funders to the extent possible and allowed by Contractor personnel policies.
- 2. Update and/or develop policies and procedures, in collaboration with the County, that will inform and guide the GRACE Program activities and expectations.
 - A. Policies and procedures will include guidance on member eligibility, referrals, types of services provided, Community Support Plans, spoke expectations and commitment of participation, data collection and tracking, and use of member flex funds/motivational incentives.
 - B. Educate and update the spoke agencies on GRACE policies and procedures and their expected role as GRACE partners.
- 3. Assume a primary leadership role for the GRACE program in collaboration with the County.
- 4. Make final determination on the status of an individual as a GRACE Program member, in consultation with the County, and then review eligibility guidelines on an annual basis.
- 5. Participate in meetings with the Executive Committee as necessary.
- 6. Convene and facilitate meetings of the Leadership and Program Teams as necessary, and in collaboration with the County.
- 7. Work closely with County and other funders to refine and analyze metrics for GRACE Program outcome measures and employ a continuous quality improvement process.
- 8. Educate community about the GRACE Program in collaboration with the County.
- 9. Ensure consistent, accurate and effective communication with multiple, diverse stakeholders, as appropriate.
- Convene and facilitate meetings with spoke agencies focused on development, implementation, and oversight of Community Support Plans for individual members of the GRACE Program, as necessary.
- 11. Ensure quality Community Support Plans are created to meet the complex needs of GRACE members to the greatest extent possible.
- 12. Engage with prospective GRACE members and encourage participation in the GRACE program.
- 13. Facilitate and provide care coordination services to GRACE members as needed.
- 14. Screen and assess or arrange for assessments of GRACE members as appropriate in an effort to develop and implement Community Support Plans that are responsive to identified needs.
- 15. Monitor caseloads to ensure delivery of adequate care coordination services and make or recommend adjustments as appropriate.
- 16. Maintain engagement and care coordination efforts with GRACE program members and prospective members despite their reticence for help, to the extent appropriate.
- 17. Work with spoke agencies to create new and/or innovative strategies where existing processes or policies are inflexible or ineffective to meet the needs of the GRACE members.
- 18. Arrange transportation or provide transportation for GRACE members for necessary appointments, as appropriate.
- Provide services out of office and on-site whenever possible to best achieve the goals of the members' Community Support Plans.
- 20. Provide medication evaluations and ongoing medication monitoring when indicated and appropriate, and in off-site locations when necessary.
- 21. Provide basic medical care as appropriate and as a bridge to connection of a member to a designated primary care provider.

- 22. Work closely with law enforcement and EMS agencies to coordinate outreach activities to GRACE members, to include teaming with these agencies during member contacts, when appropriate.
- Ensure appropriate staff training and supervision related to the complex challenges of GRACE members, to include criminogenic risk factors.
- 24. Work with County to identify topics of training to offer to spoke agencies and the community that will support the goals and activities of the GRACE program.
- 25. Work with County to maintain a member database and a reporting and communication mechanism, considering the needs for dynamic information exchange with multiple community partners.
- 26. Comply with 42 CFR Part 2, HIPAA rules, as well as State confidentiality rules.
- Work with County to identify and implement billing for member services to Medicaid and other payers, as eligible and appropriate.
- 28. Work with the County and the North Sound Accountable Community of Health (NS ACH), as GRACE is identified as one of the Medicaid Transformation projects, to provide all required information and to promote the GRACE Program.
- 29. Work closely with the County to ensure program costs are sufficiently funded and request timely reviews of program operation expenses.

B. Service Eligibility

The target population of the GRACE Program consists of individuals ("familiar faces") who have frequent contact with law enforcement and emergency response systems, high use of acute care health services including behavioral health, and challenges maintaining safe and affordable housing. As a result of their frequent contacts, familiar faces make inefficient use of public resources in an attempt to meet their needs. A high percentage of the target population is Medicaid eligible or enrolled. GRACE members may include all ages, and are not excluded because of age alone.

The Contractor will accept referrals for program admission consideration from law enforcement, EMS agencies, PeaceHealth Medical Center, Whatcom County jail, and secondarily from treatment or service provider agencies. The Contractor will utilize the GRACE Executive Committee and Leadership Team as advisory bodies to assist in developing policies for prioritizing admissions to the GRACE program.

IV. Program Requirements

A. Staffing

The contractor will provide staffing sufficient to operate the GRACE program Hub. Adequate capacity for operations must include program management and supervision, accounting and performance management, care coordination and case management, community engagement, member programming facilitation, and collaboration with the Leadership and Program teams.

Hub operations and care coordination/case management will be provided by a multidisciplinary team of behavioral health and healthcare professionals. The Contractor shall ensure that GRACE program staff have the demonstrated ability to work with complex individuals who experience acute symptoms and lifestyle patterns that are disruptive to their health and well-being. Requirements for GRACE Hub program staff follow:

- Retain program staff to provide Program Management, Administrative support, Care Coordination/Case Management capacity. Staff capacity to deliver medication evaluations, prescribing, monitoring, and consultation shall also be included in the staffing model.
 - a. Program Management shall be provided by a staff member with the demonstrated history and qualifications to manage a comprehensive program involving multiple community partners and complex members. The GRACE Program Manager will also manage the LEAD Program under the GRACE umbrella. These services shall be provided by no less than 1 FTE with GRACE covering, .5 FTE and LEAD covering .5 FTE.

- b. Care Coordination services shall be provided by no less than three (3) full-time staff members qualified to work with highly complex individuals, with specialized training in behavioral health. The County prefers that these staff hold a Master's degree or higher in a behavioral health, or other relevant field. Waiver of any of the educational or professional requirements requires approval by the County and will be considered as requested by the Contractor.
- c. Additional Case Management services shall be provided by no less than one (1) full-time staff member with experience and education working with individuals with complex needs is strongly preferred. The County prefers that this staff position holds a Bachelor's degree or higher.
- d. No less than four (4) staff members must carry a full caseload of approximately 20 GRACE members each, for a total of 80 GRACE members at any given time.
- e. Medication evaluations, prescribing, monitoring, primary care bridging, and consultation services shall be provided by an ARNP qualified in the State of Washington to provide these services. Services will be offered as necessary and available, and within program budgetary restrictions. No more than a 0.8 FTE will be dedicated to the ARNP duties.
- f. Administrative assistant capacity to assist Program Manager in the everyday operations of the GRACE Program and shall be provided at a .4 FTE.

The Contractor will also fulfill the following requirements:

- 1. Provide administrative support sufficient to sustain the GRACE program functions.
- 2. Provide office space, furniture and equipment sufficient to support the GRACE Hub, co-locating with law enforcement, EMS, etc., as appropriate.
- 3. Provide administrative and clinical supervision of program direct service staff.
- Work with County to modify program as necessary in response to potential changes relative to the NS ACH transformation projects, Medicaid billing opportunities, information exchange, or data collection and reporting.
- Work with County to review GRACE budget as needed to ensure adequate funding support for costs when/if program modifications are made.
- 6. Update Memorandums of Understanding (MOUs) with EMS as necessary to delineate roles and responsibilities of coordination and collaborative efforts on behalf of GRACE clients, to be reviewed annually.
- 7. Update MOUs with Law Enforcement agencies as necessary to clarify roles and partnerships between GRACE Care Coordination staff and law enforcement officers, to be reviewed annually.
- 8. Develop and update, as necessary, MOUs with Spoke agencies to clarify roles and responsibilities, to be reviewed annually.

V. Reporting Requirements

The Contractor shall work in collaboration with the County and the Leadership Team to identify specific metrics for GRACE program outcomes. Expected program overarching outcomes include:

- 1. Reduction in jail admissions/reduction in jail bed day utilization
- 2. Reduction in law enforcement responses
- 3. Reduction in EMS responses
- 4. Reduction in Emergency Department visits
- Improved health conditions of GRACE members

The general outcomes expected of the GRACE program also include reducing the incidence of familiar faces using multiple systems inefficiently, and while promoting healthy behaviors among GRACE members. As the program evolves, the Contractor, in collaboration with the County and the Leadership Team, will review monthly utilization data collected and then begin to solidify specific metrics.

The Contractor will collect baseline data on members newly admitted to the GRACE program to include historical utilization of First Responder systems and the Emergency Department. On a monthly basis, data will be collected by individual GRACE member on current utilization of these services. The Hub organization will work closely with the County to design a reporting tool, and then submit a monthly report which will include the following data:

- 1. Arrests
- 2. Jail admissions
- 3. Jail bed day stays
- 4. First Responder calls for assistance (law enforcement and EMS)
- 5. Emergency Department visits

EXHIBIT "B" - Amendment #3 (COMPENSATION)

I. <u>Budget and Source of Funding</u>: The source of funding for this contract is the Whatcom County Behavioral Health Program Fund, the City of Bellingham, PeaceHealth, and the North Sound Behavioral Health Administrative Services Organization Trueblood Fund. The budget for this work is as follows:

	Personnel Costs				
Item	2021 Budget				
Direct Service Personnel & Benefits	General Ledger (GL) Detail	\$360,590.16			
Program Manager & Benefits (.5 FTE)	GL Detail	\$50,614			
Admin Assistant & Benefits (.4 FTE)	GL Detail	\$19,919			
Total Personnel Costs:					
	Other Direct Costs (list):				
Item	Documentation Required	2021 Budget			
Client Service Support	Client Service Support Spreadsheet and documentation to support dispersals	\$7,000			
Mileage	Copies of mileage records, including the name of staff member, date of travel, starting point and destination of travel, number of miles traveled, per mile reimbursement rate, and a brief description of the purpose of travel. Mileage will be reimbursed at the current Federal rate.	\$4,200			
Travel/Training	\$4,300				
Occupancy	GL Detail	\$1,025			
Telephone/Technology/Utilities	GL Detail	\$4,500			
Program Supplies	GL Detail	\$2,950			
Insurance	GL Detail	\$750			
Taxes, Dues, Licenses	Receipts	\$500			
Personnel + Other Direct Costs					
Indirect Costs - not to exceed 11% of expenses					
	TOTAL BUDGET:	\$506,546.46			

II.Budget, Rates, and/or Allowable Costs:

Indirect costs shall not exceed the federally approved indirect cost rate.

Allowable costs are those set out in the approved budget submitted by the Contractor. Costs between line items cannot exceed 10% without prior written approval from County.

During calendar year 2021, quarterly reconciliation will occur to account for Contractor reimbursement from Medicaid billings. Any costs reimbursed for these services to the Contractor will not be eligible for reimbursement through this Contract.

III.Invoicing

- The Contractor shall submit itemized invoices on a monthly basis in a format approved by the County. The Contractor shall submit invoices including required documentation to (include contract #) <u>HL-BusinessOffice@co.whatcom.wa.us</u>. Monthly invoices must be submitted by the 15th of the month following the month of service. Invoices submitted for payment must include the items identified in the table above.
- Payment by the County will be considered timely if it is made within 30 days of the receipt and acceptance of billing information from Contractor. The County may withhold payment of an invoice if the Contractor submits it more than 30 days after the expiration of this contract.
- 3. Invoices must include the following statement, with an authorized signature and date:
 - I certify that the materials have been furnished, the services rendered, or the labor performed as described on this invoice.
- 4. <u>Duplication of Billed Costs or Payments for Service:</u> The Contractor shall not bill the County for services performed or provided under this contract, and the County shall not pay the Contractor, if the Contractor has been or will be paid by any other source, including grants, for those costs used to perform or provide the services in this contract. The Contractor is responsible for any audit exceptions or disallowed amounts paid as a result of this contract.

Exhibit "D" – Amendment #3 WHATCOM COUNTY CLIENT SERVICE SUPPORT GUIDELINES

"Client Service Support funds" are funds that may be used at the discretion of the Contractor, following the policies described below, to purchase goods or services directly related to the service needs of the Contractor's clients, when no other funding source is available. Such goods or services must be reasonable and necessary to meet a client's emergent service needs or contribute to the stabilization or self-sufficiency of the client.

Allowable Costs

Allowable uses of client-specific expenditures of flex funds include the following:

- Clothing
- Food
- Housing/rental assistance
- Bus passes or taxi fare
- Car repairs
- Driver's license or ID card fees
- Educational or training program registration fees
- Household supplies, including furniture
- Medications
- Health care
- Other, as approved by Whatcom County

Limitations

Flex fund expenditures must be within the allowable criteria established by the County, as identified above, must be based upon the service needs as documented in the client's individual service plan, and must have no other funding available from any other source.

Flex funds distributed to any one client/GRACE member cannot exceed \$1000 per year, except with written authorization from the County. No flex fund disbursements are to be made directly to the client but rather will be made on behalf of a client.

Documentation

Requests for reimbursement of flex funds must include the attached form including the following:

- The person or organization funds were paid to.
- Date of transaction.
- A list of the goods and/or services purchased.
- The cost of the goods and/or services purchased.
- The initials of the client and/or unique identifying number of the client for whom the goods and/or services were purchased.
- The total amount of flex funds distributed to the client during the year.
- The service need addressed by the expenditure.
- Accompanying invoices and/or receipts.
- Evidence of administrative review of expenditures

See Attached Form

Contractor:			Contract:							
contractor.			om County Health Departn	nent Client Servic	e Support Fund Do	period:	Period:			
Paid To *	Date	Cost	Goods/Services Purchased	Client ID	Total \$ To Client this Year	Service Need	No Other Funding Available	Administrative Review		
						¥1				
			+							
* ATTACH RECEIPTS FOR	EACH PURCH	IASE								