


WHATCOM COUNTY CONTRACT INFORMATION SHEET		Whatcom County Contract No. 202304013 – 6	
Originating Department:		85 Health	
Division/Program: (i.e. Dept. Division and Program)		Response Systems Division	
Contract or Grant Administrator:		Malora Christensen	
Contractor's / Agency Name:		North Sound Behavioral Health Administrative Services Organization, LLC	
Is this a New Contract?	If not, is this an Amendment or Renewal to an Existing Contract?		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If Amendment or Renewal, (per WCC 3.08.100 (a)) Original Contract #:		202304013
Does contract require Council Approval?		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	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?	If yes, grantor agency contract number(s):		North Sound BH-ASO-Whatcom County-ICN-23 CFDA#: 93.959
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
Is this contract grant funded?	If yes, Whatcom County grant contract number(s):		
Yes <input type="checkbox"/> No <input type="checkbox"/>			
Method of Procurement: N/A		Contract Cost Center: 10008602-Dedicated Cannabis / 10008588 & 10007014-SUPTRS (formerly SABG) / 18538510-Trueblood / 18538502-Jail Services / 18538520-ART	
Is this agreement excluded from E-Verify?		No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>	
If YES, indicate exclusion(s) below:			
<input type="checkbox"/> Professional services agreement for certified/licensed professional.			
<input type="checkbox"/> Contract work is for less than \$100,000.		<input type="checkbox"/> Contract for Commercial off the shelf items (COTS).	
<input type="checkbox"/> Contract work is for less than 120 days.		<input type="checkbox"/> Work related subcontract less than \$25,000.	
<input checked="" type="checkbox"/> Interlocal Agreement (between Governments).		<input type="checkbox"/> Public Works - Local Agency/Federally Funded FHWA.	
Contract Amount:(sum of original contract amount and any prior amendments):		Council approval required for; all property leases, contracts or bid awards exceeding \$40,000 , and professional service contract amendments that have an increase greater than \$10,000 or 10% of contract amount, whichever is greater, except when: <ol style="list-style-type: none"> Exercising an option contained in a contract previously approved by the council. Contract is for design, construction, r-o-w acquisition, prof. services, or other capital costs approved by council in a capital budget appropriation ordinance. Bid or award is for supplies. Equipment is included in Exhibit "B" of the Budget Ordinance Contract is for manufacturer's technical support and hardware maintenance of electronic systems and/or technical support and software maintenance from the developer of proprietary software currently used by Whatcom County. 	
\$ 3,025,135			
This Amendment Amount:			
\$ 469,534			
Total Amended Amount:			
\$ 3,494,669			
Summary of Scope: This amendment provides adds various funding through 12/31/25 and updates scopes of work and deliverables.			
Term of Contract:	1 year, auto renewals	Expiration Date:	Until terminated
Contract Routing:	1. Prepared by:	J. Thomson	Date: 07/03/2025
	2. Attorney signoff:	Kimberly A. Thulin	Date: 07/10/2025
	3. AS Finance reviewed:	Bbennett	Date: 07/10/2025
	4. IT reviewed (if IT related):		Date:
	5. Contractor approved:		Date:
	6. Executive Contract Review:	 JL	Date: 7/24/2025
	7. Council approved (if necessary):	AB2025-528	Date: 07/22/2025
	8. Executive signed:		Date: 7/28/2025
	9. Original to Council:		Date:



MEMORANDUM

TO: Satpal Sidhu, County Executive

FROM: Charlene Ramont, Interim Director

RE: North Sound Behavioral Health Administrative Services Organization, LLC – Integrated Care Network Contract Amendment #6

DATE: July 24, 2025

Attached is a contract amendment between Whatcom County and North Sound Behavioral Health Administrative Services Organization for your review and signature. This amendment adds funding for existing programs which include the Dedicated Cannabis Account, Jail Services, Substance Abuse Prevention Treatment and Recovery Support, Trueblood, and the Alternative Response Team. This amendment also adds definitions, replaces references to the 'Substance Abuse Block Grant' with 'Substance Use Prevention Treatment and Recovery Support Services (SUPTRS)', and updates scopes of work, deliverables, and budgets for the extended contract period.

- **Background and Purpose**

The purpose of this contract is to acknowledge & fund Whatcom's participation in the North Sound Integrated Care Network (ICN) in order to promote a continuity of care for individuals, avoid service disruption, ensure the provision of behavioral health services and strengthen the regional service network.

Whatcom County participates in the ICN along with Island, San Juan, Skagit, and Snohomish Counties. The North Sound Behavioral Health Administrative Services Organization (NS BH-ASO) administers the ICN to cooperatively provide a community health program and regional system of care, with the collective goal of consolidating administration, reducing administrative layering and reducing administrative costs, consistent with the State of Washington's legislative policy as set forth in [RCW 71.24](#).

- **Funding Amount and Source**

Total funding added by this amendment is \$469,534 for the period of 07/01/2025 – 12/31/2025. These funds are included in the 2025 budget. The contract includes terms for automatic annual renewals. Council authorization is required as the additional grant funding provided by this amendment exceeds \$40,000, per WCC 3.06.010.

Please contact Malora Christensen, Response Systems Manager at 360-778-6131 (MChriste@co.whatcom.wa.us) if you have any questions or concerns regarding this request.



**NORTH SOUND BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION, LLC
(NORTH SOUND BH-ASO)
CONTRACT AMENDMENT 6**

CONTRACT #NORTH SOUND BH-ASO-WHATCOM COUNTY-ICN-23

Based on the Agreement of the parties to the above-referenced Contract between the North Sound Behavioral Health Administrative Services Organization, LLC (North Sound BH-ASO) and Whatcom County (Provider) dated April 13, 2023, (as amended by North Sound BH-ASO and Provider February 13, 2025, collectively the “Contract”) is hereby amended as follows:

The purpose of this amendment is to: add/remove/replace definitions; provide funding for July 1, 2025 to December 31, 2025; remove *Co-Responder Services*; and, add *Alternative Response Team Services*.

By mutual agreement of the parties, the following language is added to the agreement:

- **Add the following new definitions to *Article 1 – Definitions*:**

“Behavioral Health Service Provider” means a public or private agency that provides mental health, substance use disorder, or co-occurring disorder services to persons with Behavioral Health disorders as defined under this section and receives funding from public sources. This includes, but is not limited to hospitals licensed under chapter 70.41 RCW; Evaluation and Treatment Facilities; community mental health service delivery systems or community Behavioral Health programs as defined in RCW 71.24.025; licensed or certified Behavioral Health agencies under RCW 71.24.037; an entity with a Tribal attestation that it meets minimum standards or a licensed or certified Behavioral Health agency as defined in RCW 71.24.025; facilities conducting competency evaluations and restoration under chapter 10.77 RCW; approved substance use disorder treatment programs as defined in this section; Secure Withdrawal Management and Stabilization Facilities as defined in this section; and correctional facilities operated by state, local, and Tribal governments.

“Certified Peer Specialist (CPS)” means a person who meets the certification requirements as set forth in RCW 18.420.050 and is certified under chapter 18.420 RCW to engage in the practice of Peer Support Services.

“Certified Peer Specialist Trainee (CPST)” means a person who meets the certification requirements as set forth in RCW 18.420.060 and is working toward the supervised experience requirements to become a Certified Peer Specialist under chapter 18.420 RCW.

“Substance Use Prevention, Treatment, and Recovery Services (SUPTRS)” means the federal Substance Use Prevention, Treatment, and Recovery Services block

grant program authorized by Section 1921 of Title XIX, Part B, Subpart II and III of the Public Health Service Act.

- **Remove 1.26 Substance Abuse Federal Block Grant (SABG)**, which reads SABG means the Federal Substance Abuse Block Grant Program authorized by Section 1921 of Title XIX, Part B, Subpart II and III of the Public Health Service Act.
- **Replace 1.5 Certified Counselor**, which reads “Certified Peer Counselor (CPC) means Individuals who: have self-identified as a consumer of behavioral health services; have received specialized training provided/contracted by HCA’s, Division of Behavioral Health and Recovery (DBHR); have passed a written/oral test, which includes both written and oral components of the training; have passed a Washington State background check; have been certified by DBHR; and are a registered Agency Affiliated Counselor with the Department of Health (DOH).” **with the following:**

Certified Peer Counselor (CPC) means a person who meets certification requirements as set forth in WAC 182-115-0200 to engage in the practice of Peer Support Services until December 31, 2025.

- **Replace 1.8 Culturally Appropriate Care**, which reads “Culturally Appropriate Care means health care services provided with Cultural Humility and an understanding of the patient’s culture and community, and informed by Historical Trauma and the resulting cycle of Adverse Childhood Experiences (ACEs).” **with the following:**

“Culturally Appropriate Care” means the practice of being sensitive to a person’s cultural identity or heritage. Health care services are provided with Cultural Humility and an understanding of the patient’s culture and community and informed by Historical Trauma and the resulting cycle of Adverse Childhood Experiences (ACEs).

- **Replace Exhibit A_Schedule of Services** with *Exhibit A(a)_Schedule of Services*
- **Replace Exhibit D(b)_Provider Deliverables** with *Exhibit D(c)_Provider Deliverables*
- **Replace Exhibit E(d) - Whatcom County_Budget_ICN_24** with *Exhibit E(e) - Whatcom County_ICN_Budget*
- **Replace Exhibit F(b)_Federal Subaward Identification** with *Exhibit F(c)_Federal Subaward Identification*
- **Add Exhibit G_Alternative Response Team_Scope of Work**

ALL TERMS AND CONDITIONS OF CONTRACT SHALL REMAIN IN FULL FORCE AND EFFECT.

THIS AMENDMENT IS EXECUTED BY THE PERSONS SIGNING BELOW, WHO WARRANT THAT THEY HAVE THE AUTHORITY TO EXECUTE THIS AMENDMENT.

THIS AMENDMENT SHALL BECOME EFFECTIVE ON THE DATE OF FINAL SIGNATURE BY THE PARTIES.

PROGRAM APPROVAL:

Signed by:

Malora Christensen

00E05E4A7809409

7/24/2025

Date

Malora Christensen, Response Systems Manager

DEPARTMENT HEAD APPROVAL:

Signed by:

Charlene Ramont

C1DD9BE6CCAC4DC

7/24/2025

Date

Charlene Ramont, Interim Director

Whatcom County Health and Community Services

APPROVAL AS TO FORM:

Approved by email KT/JT

07/10/2025

Kimberly A. Thulin, Senior Civil Deputy Prosecutor

Date

CONTRACTOR INFORMATION:

North Sound Behavioral Health Administrative Services Organization
2021 E College Way, Suite 101
Mt Vernon, WA 98273
800-684-3555



North Sound BH-ASO
 2021 E. College Way, Suite 101, Mt. Vernon, WA 98273
 Phone: (360) 416-7013 Fax: (360) 899-4754
www.nsbhaso.org

EXHIBIT A(a): SCHEDULE OF SERVICES

PROVIDER: Whatcom County

CONTRACT: NORTH SOUND BH-ASO-WHATCOM COUNTY-ICN-23

CONTRACT PERIOD: 01/01/2023 – 12/31/2025

Identification of Contracted Services

Provider shall provide behavioral health covered crisis services, as indicated in the Contracted Services Grid below, within the scope of Provider's business and practice, in accordance with the Whatcom County Base Provider Agreement, North Sound BH-ASO Behavioral Health Policies and Procedures, Supplemental Provider Service Guide, North Sound BH-ASO and HCA standards, the terms, conditions and eligibility outlined in the Contract and/or Exhibits, and the requirements of any applicable government sponsored program.

Contracted Services Grid

Contracted Timeframe	Service	Supplemental Provider Service Guide Reference (click here)
<i>Outpatient Services (Within Available Resources)</i>		Chapter 20
	Mental Health Outpatient and Medication Management	Section 20.1
	Substance Use Disorder Outpatient Benefit	Section 20.1
	Medication-Assisted Treatment	Section 20.1
	Opiate Treatment Program (OTP)	Section 20.1
	Program for Assertive Community Treatment (PACT)	Section 20.12
<i>Evaluation and Treatment</i>		Section 20.4
	Sixteen-Bed Evaluation and Treatment Facility Services	Section 20.4

Contracted Timeframe	Service	Supplemental Provider Service Guide Reference (click here)
<i>Crisis Services</i>		Chapter 18
	Adult Mobile Crisis Outreach Team	Section 20.2.2
	Child/Youth Mobile Crisis Outreach Team	Section 20.2.5
	Crisis Stabilization	Chapter 18;20.2.4
	Involuntary Treatment Evaluation (ITA) ⁽	Chapter 18; 20.2.3
	Toll Free Crisis Hotline	Chapter 18
<i>Withdrawal Management Services (Within in Available Resources) ⁽</i>		Chapter 20
	Clinically Managed Withdrawal Management (formerly Sub-Acute Withdrawal Management) ⁽	Section 20.1
	Medically Monitored Inpatient Withdrawal Management	Section 20.2.4
	Secure Withdrawal Management	Chapter 18
<i>Substance Use Disorder Residential (Within Available Resources) ⁽</i>		Section 20.10
	Youth - Intensive Inpatient	Section 20.15.2
	Youth – Recovery House	Section 20.15.6
	Adult - Intensive Inpatient	Section 20.15.1
	Adult - Long-Term Care	Section 20.15.3
	Adult - Recovery House	Section 20.15.5
	Pregnant and Parenting Women Residential Treatment	Section 2.1
	Pregnant and Parenting Women Housing Support	Section 2.1; 20.15.4
<i>Mental Health Services in a Residential Setting (Within Available Resources) ⁽</i>		Section 20.10
<i>Crisis Triage (Within Available Resources) ⁽</i>		Chapter 18
	Crisis Stabilization	Chapter 18
	Clinical Managed Withdrawal Management	Chapter 18
<i>Legislative Proviso Services (Within Available Resources) ⁽</i>		Chapter 19
Effective January 1, 2023	Jail Transition Services	Section 19.8
	E&T Discharge Planners	Section 17.2
	Program for Assertive Community Treatment (PACT) ⁽	Section 20.12
Effective January 1, 2023	Designated Cannabis Account (DCA) ⁽	Section 19.5

Contracted Timeframe	Service	Supplemental Provider Service Guide Reference (click here)
	Juvenile Treatment Services	Section 19.9
	Assisted Outpatient Treatment (AOT ⁽	Section 19.1
	Homeless Outreach Stabilization Team (HOST ⁽	Section 19.6
Effective January 1, 2023	Trueblood Misdemeanor Diversion	Section 19.13
	Recovery Navigator Program	Section 19.11
<i>Federal Block Grant</i>		Chapter 15
	Peer Bridgers	Section 15.1
	PPW Housing Support Services	Section 20.15.4
	PATH	Section 15.1
	Peer Path Finder	Section 15.1
Effective January 1, 2023	Opiate Outreach	Section 20.11
<i>HARPS</i>		Section 19.7
	HARPS Team	
	HARPS Subsidies	
<i>Co-Responder Outreach Program</i>		Section 19.4
<i>Alterative Response Team (ART⁽</i>		Not applicable
Effective July 1, 2025	Alternative Response Team – Whatcom County	Not applicable



North Sound BH-ASO

2021 E. College Way, Suite 101, Mt. Vernon, WA 98273

Phone: (360) 416-7013 Fax: (360) 899-4754

www.nsbhaso.org

EXHIBIT D(c): PROVIDER DELIVERABLES

PROVIDER: Whatcom County

CONTRACT: NORTH SOUND BH-ASO-WHATCOM COUNTY-ICN-23

CONTRACT PERIOD: 01/01/2023 – 12/31/2025

Identification of Deliverables

Provider shall provide all deliverables as identified in the Required Deliverables Grid below. Templates for all reports that the provider is required to submit to North Sound BH-ASO may be found on the North Sound BH-ASO website under *Forms & Reports* (click [here](#)). North Sound BH-ASO may update the templates from time to time and will notify providers of any changes. Deliverables are to be submitted to deliverables@nsbhaso.org on or before the indicated due date unless otherwise noted. For more information regarding a specific deliverable, please refer to the indicated Supplemental Provider Service Guide reference (as applicable).

DELIVERABLE	FREQUENCY	DUE DATE	SUPPLEMENTAL PROVIDER SERVICE GUIDE REFERENCE
Exclusion Attestation Monthly Report	Monthly	Last Business Day of each month following the month being reported	Chapter 11
Opioid Outreach Report	Monthly	Last Business Day of each month following the month being reported	Not applicable
Opioid Outreach YOUTH Report	Monthly	Last Business Day of each month following the month being reported	Not applicable
Trueblood Monthly Report	Monthly	10 th of each month following the month being reported	Chapter 19; Section 19.13
Alternative Response Team Report	Quarterly	15 th of the month following the quarter being reported (1/15, 4/15, 7/15, 10/15)	Chapter 19; Section 19.4

DELIVERABLE	FREQUENCY	DUE DATE	SUPPLEMENTAL PROVIDER SERVICE GUIDE REFERENCE
Certification of Liability Insurance	Annual	Annually prior to expiration	Not Applicable
Compliance Training Attestation Statement	Annual	Annual notification will be sent by North Sound BH-ASO Compliance Officer with further information	Chapter 11
Jail Transition Services Report	Annual	Annually by August 15 th	Chapter 19; Section 19.8
Ownership and Control Disclosure Form	Annual	Annually on January 31 st , or more frequently when changes occur	Not applicable
Federal Block Grant Peer Review	As requested	Annually when requested	Chapter 15

North Sound Behavioral Health Administrative Services Organization Dedicated Cannabis Account Program Cost Reimbursement Budget Whatcom County Human Services		
Six Month Budget July 1, 2025 to December 31, 2025		
Revenues		
Dedicated Cannabis Account Funding	\$	41,719.00
Total	\$	41,719.00
Expenses		
Dedicated Cannabis Account	\$	41,719.00
Total	\$	41,719.00
Budget Amount	\$	41,719.00
Expenses		-
Balance	\$	41,719.00

North Sound Behavioral Health Administrative Services Organization Jail Services Program Cost Reimbursement Budget Whatcom County Human Services		
Six Month Budget July 1, 2025 to December 31, 2025		
Revenues		
Jail Services Funding	\$	38,329.00
Total	\$	38,329.00
Expenses		
Jail Services	\$	38,329.00
Total	\$	38,329.00
Budget Amount	\$	38,329.00
Expenses		-
Balance	\$	38,329.00

North Sound Behavioral Health Administrative Services Organization Substance Abuse Block Grant CFDA 93.959 Cost Reimbursement Budget Whatcom County Human Services		
Six Month Budget July 1, 2025 to December 31, 2025		
Revenues		
SABG	\$	203,114.00
Total	\$	203,114.00
Expenses		
Opiate Outreach Services	\$	203,114.00
Total	\$	203,114.00
Budget Amount	\$	203,114.00
Expenses		-
Balance	\$	203,114.00

**Substance Use Prevention Treatment and Recovery Support
Services (SUPTRS) Formerly (SABG)**

North Sound Behavioral Health Administrative Services Organization Trueblood Program Cost Reimbursement Budget Whatcom County Human Services		
Six Month Budget July 1, 2025 to December 31, 2025		
Revenues		
Trueblood Funding	\$	19,992.91
Total	\$	19,992.91
Expenses		
Trueblood Expenses	\$	19,992.91
Total	\$	19,992.91
Budget Amount	\$	19,992.91
Expenses		-
Balance	\$	19,992.91

North Sound Behavioral Health Administrative Services Organization Alternative Response Team Cost Reimbursement Budget Whatcom County Human Services		
Six Month Budget July 1, 2025 to December 31, 2025		
Revenues		
MHBG Funds	\$	85,743.00
SUPTRS Funds	\$	80,636.00
Total	\$	166,379.00
Expenses		
Alternative Response Team	\$	166,379.00
Total	\$	166,379.00
Budget Amount	\$	166,379.00
Expenses		-
Balance	\$	166,379.00
Substance Use Prevention Treatment and Recovery Support Services (SUPTRS) Formerly (SABG)		



North Sound BH-ASO

2021 E. College Way, Suite 101, Mt. Vernon, WA 98273

Phone: (360) 416-7013 Fax: (360) 899-4754

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Exhibit F(c) Federal Subaward Identification K8347

1.	Federal Awarding Agency	Dept. of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA)
2.	Federal Award Identification Number (FAIN)	B08TI088142
3.	Federal Award Date	02/24/2025
4.	Assistance Listing Number and Title	93.959 Block Grants for Prevention and Treatment of Substance Abuse
5.	Is the Award for Research and Development?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6.	Contact Information for North Sound BH-ASO Awarding Official	Lis Hudspeth, Contracts Manager North Sound Behavioral Health Administrative Services Organization Lisa_hudspeth@nshbaso.org 360-416-7013
7.	Subrecipient name (as it appears in SAM.gov)	Whatcom County Human Services
8.	Subrecipient's Unique Entity Identifier (UEI)	NT6RMN8THTN7
9.	Subaward Project Description	Opiate Outreach Services
10.	Primary Place of Performance	98225
11.	Subaward Period of Performance	07/01/2025 – 12/31/2025
12.	Amount of Federal Funds Obligated by this Action	\$203,114
13.	Total Amount of Federal Funds Obligated by North Sound BH-ASO to the Subrecipient, including this Action	\$203,114
14.	Indirect Cost Rate for the Federal Award (including if the de minimis rate is charged)	de minimus (10%)