

<b>WHATCOM COUNTY CONTRACT INFORMATION SHEET</b>	Whatcom County Contract No. <b>201904004 -10</b>
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Originating Department:	85 Health
Division/Program: (i.e. Dept. Division and Program)	8550 Human Services / Various Programs
Contract or Grant Administrator:	Perry Mowery
Contractor's / Agency Name:	North Sound Behavioral Health Administrative Services Organization

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 #:	
		201904004	

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?		NORTH SOUND BH-ASO WHATCOM ICN 19-20	CFDA#:	93.959
Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	If yes, grantor agency contract number(s):		

Is this contract grant funded?		If yes, Whatcom County grant contract number(s):
Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Is this contract the result of a RFP or Bid process?		Contract Cost Center:	Various
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	If yes, RFP and Bid number(s):	

Is this agreement excluded from E-Verify?	No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/>	If no, include Attachment D Contractor Declaration form.
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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):

\$ 1,848,820

This Amendment Amount:

\$ 484,460

Total Amended Amount:

\$ 2,333,280

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:**

1. Exercising an option contained in a contract previously approved by the council.
2. Contract is for design, construction, r-o-w acquisition, prof. services, or other capital costs approved by council in a capital budget appropriation ordinance.
3. Bid or award is for supplies.
4. Equipment is included in Exhibit "B" of the Budget Ordinance
5. 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.

Summary of Scope: This agreement establishes Whatcom County's participation in the Integrated Care Network administered by the North Sound Behavioral Health Administrative Services Organization as the lead agency to provide behavioral health services coordination, management, and support to the five regional County authorities.

Term of Contract:	Until superseded	Expiration Date:	N/A
Contract Routing:	1. Prepared by:	JT	Date: 06/24/2022
	2. Attorney signoff:	RB	Date: 06/30/2022
	3. AS Finance reviewed:	M Caldwell	Date: 6/24/22
	4. IT reviewed (if IT related):		Date:
	5. Contractor signed:	<sup>DS</sup>	Date:
	6. Executive Contract Review:	<i>SM</i>	Date: 7/14/2022
	7. Council approved (if necessary):	AB2022-386	Date: 07/12/2022
	8. Executive signed:		Date: 7/14/2022
	9. Original to Council:		Date:



**MEMORANDUM**

**TO:** Satpal Sidhu, County Executive  
**FROM:** Erika Lautenbach, Director  
**RE:** North Sound Behavioral Health Administrative Services Organization, LLC – Integrated Care Network Agreement Amendment #10  
**DATE:** July 13, 2022

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Attached is an interlocal agreement amendment between Whatcom County and North Sound Behavioral Health Administrative Services Organization for your review and signature.

▪ **Background and Purpose**

The purpose of this agreement is to consent to participation in the North Sound Integrated Care Network (ICN) administered by the North Sound Behavioral Health Administrative Services Organization (NS BH ASO). In order to provide behavioral health services to Medicaid-insured individuals in the North Sound Regional Service Area (NSRSA) which includes Island, San Juan, Skagit, Snohomish, and Whatcom Counties, participation in the ICN is required. The NS BH ASO is the authorized administrator of these behavioral health services for the NSRSA, per the Washington State Health Care Authority. This amendment extends the agreement for six months and increases funding for the extended agreement period. In addition, this amendment adds a statement of work and funding for the Law Enforcement Co-Response Outreach Program to provide field-based outreach services, designed to enhance first responder capacity to immediately provide field-based interventions and ensure referral and linkage to ongoing behavioral health treatment when appropriate.

▪ **Funding Amount and Source**

Funding for this contract period (07/01/2022 – 12/31/2022) is expected at \$484,460 and funding for the entire contract period (07/01/2019 – 06/30/2022) is \$2,333,280. Funding is provided by the Dedicated Marijuana Account, Jail Services, Trueblood, and Law Enforcement Co-Response Outreach Programs, as well as the federal Substance Abuse Block Grant (CFDA 93.959), each passed through the NS BH ASO. Council approval is required as new grant funds exceeding \$40,000 are provided by this amendment.

Please contact Perry Mowery, Behavioral Health & Special Projects Supervisor at 360-778-6059 ([PMowery@co.whatcom.wa.us](mailto:PMowery@co.whatcom.wa.us)) or Kathleen Roy, Assistant Director at 360-778-6007 ([KRoy@co.whatcom.wa.us](mailto:KRoy@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 #10**

**CONTRACT #NORTH SOUND BH-ASO-WHATCOM COUNTY ICN 19-23**

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) March 27, 2019, (as amended by North Sound BH-ASO and Provider February 1, 2022, collectively the "Contract") is hereby amended as follows:

The purpose of this amendment is to add funding for the Co-Responder program and ongoing funding for the period of July 1, 2022 through December 31, 2022.

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

1. Replace NS BH-ASO-Whatcom County-Budget 2022-G with NS BH-ASO-Whatcom County Budget 2022-H
2. Add Exhibit C – Co-Responder Statement 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.

**NORTH SOUND BH-ASO, LLC**

**WHATCOM COUNTY**

*Joe Valentine*

6/24/2022

DocuSigned by:  
*Satpal Singh Sidhu*  
1192C7C18B664E3...

7/14/2022

\_\_\_\_\_  
Joe Valentine  
Executive Director

Date

\_\_\_\_\_  
Satpal Sidhu  
County Executive

Date

APPROVAL AS TO PROGRAM:	<small>DocuSigned by:</small> <i>Perry Mowery</i> <small>B619DC95CDBC4A9...</small>	7/13/2022
	Perry Mowery, Behavioral Health & Special Projects Supervisor	Date
DEPARTMENT HEAD APPROVAL:	<small>DocuSigned by:</small> <i>Erika Lautenbach</i> <small>055C651A30374BD...</small>	7/13/2022
	Erika Lautenbach, Health Department Director	Date
APPROVL AS TO FORM:	<small>DocuSigned by:</small> <i>Royce Buckingham</i> <small>1EE5DDBD9542404...</small>	7/14/2022
	Royce Buckingham, 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 Behavioral Health Administrative Service Organization**  
**Law Enforcement Co-Response Outreach Program**  
**Statement of Work**

**Purpose**

To provide behavioral health outreach while reducing criminal justice system involvement for individuals with mental health and substance use disorder treatment needs. Co-Response outreach programs consist of law enforcement officer(s) and behavioral health professional(s) that provide individuals with substance use disorder or other behavioral health needs with access to treatment that would otherwise be involved in the criminal justice system. Co-response outreach is designed to enhance first responder capacity to immediately provide field-based interventions and ensure referral and linkage to ongoing behavioral health treatment when appropriate.

1. Provide field-based outreach services and intensive case management support to individuals who frequently encounter the criminal justice system.
2. Provide diversion focused interventions or alternative to law enforcement responses to calls where substance use disorder or other behavioral health needs are identified.

**Services**

Co-Responder outreach programs:

1. Provide behavioral health outreach interventions and person-centered de-escalation that use least invasive interventions.
2. Employ field-based strategies to identify individuals with substance use disorders and other behavioral health needs in a culturally competent, recovery oriented, trauma sensitive manner.
3. Maintain referral pathways for community members, emergency services, treatment providers and other community-based entities.
4. Support direct linkages to treatment supports to include facility-based crisis stabilization and triage, withdrawal management, outpatient or medical services or other behavioral health or community-based care supports as appropriate.
5. Provide care coordination and case management.

### **Priority Populations**

Priority populations should focus on any individual with a behavioral health condition who are at risk of arrest and/or frequent contact with first responders, community members and who could benefit from being connected to supportive behavioral health treatment or other supportive resources when amendable.

1. Individuals who have frequent criminal legal system contact because of substance use disorder or other behavioral health needs.
2. Individuals who are at risk of arrest, or already have been involved in the criminal justice system.
3. Individuals who cannot, on their own, access local safety-net services.

### **Program Staffing**

Co-response outreach programs should be staffed with Master Level behavioral health professional(s), bachelor Level and/or Certified Peer Counselors (CPC). Licensed behavioral health professional(s) can include licensed Mental Health Professionals (MHP) and licensed Substance Use disorder Professionals (SUDP).

### **Coordination**

1. Co-response outreach services will coordinate with crisis services to include referral to a Designated Crisis Responders (DCRs).
2. Co-Response outreach services will coordinate closely with parallel emergency services, criminal justice systems, inpatient/residential service providers, tribal governments, Indian Health Care Providers (IHCP) and outpatient providers to ensure access to timely and appropriate behavioral health treatment services.
3. Co-Response outreach services shall coordinate closely with other local community-based diversion programs.

### **Training**

Law enforcement or first responders who are providing co-response interventions are encouraged to be trained in Crisis Intervention Training (CIT). Agencies are required to ensure licensed professionals who are conducting co-response services have access to training, such as the following:

1. Motivational interviewing
2. Strength-based and harm reduction interventions
3. Trauma-informed practices
4. Cultural humility
5. Mental Health First Aid
6. Conflict resolution and de-escalation techniques

7. Suicide risk assessment and prevention
8. Overdose prevention, recognition, and response
9. Law enforcement or first responder sponsored trainings.

**Reporting**

Programs will submit Quarterly reports to North Sound BH-ASO. Reporting will include number of individuals served, outcomes of services provided and a narrative describing successes and challenges.

**North Sound Behavioral Health Administrative Services Organization  
Dedicated Marijuana Account Program  
Cost Reimbursement Budget  
July 1, 2022 to December 31, 2022  
Whatcom County Human Services**

**Revenues**

Dedicated Marijuana Account Funding	\$	41,719
Total	\$	<u>41,719</u>

**Expenses**

Dedicated Marijuana Account	\$	41,719
Total	\$	<u>41,719</u>



**North Sound Behavioral Health Administrative Services Organization  
Jail Services Program  
Cost Reimbursement Budget  
July 1, 2022 to December 31, 2022  
Whatcom County Human Services**

**Revenues**

Jail Service Funding	\$	42,583.19
Total	\$	<u>42,583.19</u>

**Expenses**

Jail Service	\$	42,583.19
Total	\$	<u>42,583.19</u>

**North Sound Behavioral Health Administrative Services Organization  
Substance Abuse Block Grant CFDA 93.959  
Cost Reimbursement Budget  
July 1, 2022 to December 31, 2022  
Whatcom County Human Services**

**Revenues**

SABG Funds	\$	203,114.00
SABG COVID Funds	\$	30,000.00
Total	\$	<u>233,114.00</u>

**Expenses**

Opiate Outreach Services	\$	203,114.00
Additional SABG	\$	30,000.00
Total	\$	<u>233,114.00</u>

**North Sound Behavioral Health Administrative Services Organization  
Trueblood Program  
Cost Reimbursement Budget  
July 1, 2022 to December 31, 2022  
Whatcom County Human Services**

**Revenues**

Trueblood Funding	\$	49,262.00
Total	\$	<u>49,262.00</u>

**Expenses**

Trueblood Expenses	\$	49,262.00
Total	\$	<u>49,262.00</u>

**North Sound Behavioral Health Administrative Services Organization  
Co-Responder  
Cost Reimbursement Budget  
July 1, 2022 to December 31, 2022  
Whatcom County Human Services**

**Revenues**

MHBG Covid Funds		\$	111,782.00
	Total	\$	<u>111,782.00</u>

**Expenses**

Co-Responder Expense		\$	111,782.00
	Total	\$	<u>111,782.00</u>

# North Sound Behavioral Health

## Monthly Billing Form

Agency Name \_\_\_\_\_  
 Program \_\_\_\_\_  
 Period Covered \_\_\_\_\_

### Expenses

Salaries & Wages	\$	-
Personnel Benefits	\$	-
Office & Operating Supplies	\$	-
Small Tool & Minor Equipment	\$	-
Professional Services	\$	-
Communications	\$	-
Travel	\$	-
Operating Rentals	\$	-
Insurance	\$	-
Utilities	\$	-
Repair & Maintenance	\$	-
Machinery & Equipment	\$	-
Miscellaneous Expense	\$	-
Capital	\$	-
Direct Cost Allocations	\$	-
Indirect Cost Allocations	\$	-
Other		
<b>Total</b>	<b>\$</b>	<b>-</b>

Vendor's Certificate. I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise or services furnished to the State of Washington, and that all goods furnished and/or services rendered have been provided without discrimination.

Signature of Agency Representative \_\_\_\_\_  
 Name of Agency Representative \_\_\_\_\_  
 Date \_\_\_\_\_

Submit to [fiscal@nsbhaso.org](mailto:fiscal@nsbhaso.org)