

**WHATCOM COUNTY CONTRACT  
INFORMATION SHEET**

Whatcom County Contract No.  
201906025 - 1

Originating Department:	85 Health
Division/Program: (i.e. Dept. Division and Program)	8550 Human Services / 855060 Substance Abuse Program
Contract or Grant Administrator:	Kathleen Roy
Contractor's / Agency Name:	Pioneer Human Services

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 #:	201906025	

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):	CFDA#:	
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			

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

Is this contract the result of a RFP or Bid process?	If yes, RFP and Bid number(s):	Contract Cost Center:	675600
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			

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 checked="" 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 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 <b>exceeding \$40,000</b> , and professional service contract amendments that have an increase greater than \$10,000 or 10% of contract amount, whichever is greater, <b>except when:</b>
Varies depending on number of clients authorized	<ol style="list-style-type: none"> <li>Exercising an option contained in a contract previously approved by the council.</li> <li>Contract is for design, construction, r-o-w acquisition, prof. services, or other capital costs approved by council in a capital budget appropriation ordinance.</li> <li>Bid or award is for supplies.</li> <li>Equipment is included in Exhibit "B" of the Budget Ordinance</li> <li>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.</li> </ol>

Summary of Scope: This contract will provide funding to deliver substance use disorder (SUD) assessments and post-assessment treatment coordination as a component of re-entry for inmates who are releasing from the Whatcom County Jail.

Term of Contract:	1 Year	Expiration Date:	12/31/2020
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Contract Routing:	1. Prepared by:	JT	Date:	09/20/2019
	2. Health Budget Approval	KR	Date:	10/08/2019
	3. Attorney signoff:	RB	Date:	10/09/2019
	4. AS Finance reviewed:	<i>for</i> bbennett <i>MZ</i>	Date:	10/10/2019 <i>11/4/19</i>
	5. IT reviewed (if IT related)		Date:	
	6. Contractor signed:		Date:	
	7. Submitted to Exec.:		Date:	
	8. Council approved (if necessary):		Date:	
	9. Executive signed:		Date:	
	10. Original to Council:		Date:	

**WHATCOM COUNTY HEALTH DEPARTMENT CONTRACT AMENDMENT**

**PARTIES:**

**Whatcom County  
Whatcom County Health Department  
509 Girard Street  
Bellingham, WA 98225**

**AND CONTRACTOR:  
Pioneer Human Services  
7440 West Marginal Way S  
Seattle, WA 98108**

**AMENDMENT NUMBER: 1**

**CONTRACT PERIODS:**

**Original: 07/01/2019 – 12/31/2019**

**Amendment #1: 01/01/2020 – 12/31/2020**

**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, Section V. Reporting Requirements, to revise the reporting method and information required to be submitted; revised Exhibit A is attached.
3. All other terms and conditions remain unchanged.
4. The effective start date of the amendment is 01/01/2020.

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: Anne Deacon 10/28/19  
Anne Deacon, Human Services Manager Date

DEPARTMENT HEAD APPROVAL: Regina A. Delahunt 10/28/19  
Regina A. Delahunt, Health Department Director Date

APPROVAL AS TO FORM: Royce Buckingham 10/31/19  
Royce Buckingham, Civil Deputy Prosecuting Attorney Date

**FOR THE CONTRACTOR:**

Audrey Hicks | AUDREY HICKS, CFO | 10/24/19  
Contractor Signature | Print Name and Title | Date

STATE OF WASHINGTON )  
COUNTY OF WHATCOM )

On this 24<sup>th</sup> day of OCTOBER, 2019, before me personally appeared AUDREY HICKS, to me known to be the CFO and who executed the above instrument and who acknowledged to me the act of signing and sealing thereof.

Vicki L. Rush  
NOTARY PUBLIC in and for the State of Washington  
Residing at SEATTLE, WA



My Commission expires: 04-09-2022

**FOR WHATCOM COUNTY:**

\_\_\_\_\_  
Jack Louws, County Executive Date

STATE OF WASHINGTON )  
COUNTY OF WHATCOM )

On this \_\_\_\_\_ day of \_\_\_\_\_, 2019, before me personally appeared Jack Louws, to me known to be the Executive of Whatcom County and who executed the above instrument and who acknowledged to me the act of signing and sealing thereof.

\_\_\_\_\_  
NOTARY PUBLIC in and for the State of Washington,  
Residing at Bellingham.

My Commission expires: \_\_\_\_\_

**EXHIBIT "A" – Amendment #1**  
**(SCOPE OF WORK)**

**I. Background**

A 2016 Department of Health and Social Services (DSHS) report indicated that 86% of inmates in the Whatcom County Jail were Medicaid recipients over the five year period prior to a booking in the jail. The report also indicated that of those inmates who were Medicaid recipients, 68% had a substance use disorder (SUD). Certain estimates place the prevalence of SUD in jails higher than 80% and the addition of the non-Medicaid jail population increases the likelihood of a higher volume of SUD service needs. The opioid crisis peaked in Whatcom County in 2016 and the effects of the crisis were even more endemic in frontline institutions such as our jail. The need for SUD services during and after release from jail is clearly indicated.

Research demonstrates that inmates detained in jails are more susceptible to relapse and overdose upon release from jail. SUD assessments and linkages to treatment are effective options to deter the cycle of relapse and readmission to jail.

The purpose of this contract is to deliver (SUD) assessments and post-assessment treatment coordination as a component of re-entry for inmates who are releasing from the Whatcom County Jail. The goal is to provide eligible inmates with smooth transitions to community inpatient or outpatient treatment. These services have broad support from both the local Criminal Justice Treatment Account (CJTA) panel and from the local Incarceration Prevention and Reduction Task Force.

**II. Definitions**

American Society of Addiction Medicine (ASAM) Criteria – Medical and psychosocial criteria used by SUD professionals to determine individual placement in treatment. ASAM is a standard used in the SUD treatment profession after a diagnosis of SUD is made.

Criminal Justice Treatment Account (CJTA) – A fund designated by state law to treat certain non-violent drug offenders who have an SUD that if not treated is likely to result in addiction or is already addiction. Eligibility for CJTA is further described in the contract.

Chemical Dependency Professional (CDP) & Chemical Dependency Professional Trainees (CDPT) – These are Washington State credentials for professionals and trainees who specialize in the treatment of substance use disorders.

Diagnostic and Statistical Manual 5 (DSM5) – The current standard manual used for the classification of and diagnosis of mental disorders.

Recovery – A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. (SAMHSA)

Release of Information (ROI) – This is written form for client consent to share information with other people or entities who are involved with the client's care. ROIs are required by federal regulations such as 42 Part 2 CFR and by Health Insurance and Portability Act (HIPAA) and are designed to protect client confidentiality. (See the following links for more information: <https://www.ecfr.gov/cgi-bin/text-idx?rgn=div5&node=42:1.0.1.1.2> and <https://www.hhs.gov/hipaa/index.html>)

Substance Use Disorder (SUD) – A diagnostic classification in the DSM-5 which combines substance abuse and addiction into a single disorder (or set of disorders) which is measured along a continuum from mild to severe depending on symptoms.

Washington Administrative Code (WAC) – Regulations are a source of primary law in Washington State. Regulations of executive branch agencies are issued by authority of statutes. The WAC codifies the regulations and arranges them by subject or by agency.

Substance Abuse and Mental Health Administration (SAMHSA) – A federal organization that provides funding, key policy decisions, oversight, data and information related to substance abuse and mental health issues and services.

**III. Statement of Work**

The Contractor will respond to calls from referents that include therapeutic court staff, public defenders, jail behavioral health professionals, corrections staff, or family members to conduct assessments in the Whatcom County Jail. The Contractor shall conduct SUD assessments for eligible inmates at the jail and coordinate treatment placement for those individuals.

Assessments shall be conducted in person according to WAC 388-877-0610 and shall include a strengths-based biopsychosocial history. The assessment shall include an SUD diagnosis, according to DSM5, and a determination of treatment placement according to

ASAM. The agency will secure all pertinent releases of information and ensure engagement with inpatient or outpatient treatment, depending on client need.

The Contractor will provide approximately 40 assessments per year, accompanied by individual case management services sufficient to ensure treatment coordination.

#### Eligibility Criteria:

People who are eligible for SUD jail assessments must meet all of the following criteria:

1. Be Medicaid eligible and exiting the jail with the intention of entering a treatment program, or
2. All of the following under CJTA:
  - a. Have a charge filed by a prosecuting attorney in the state of Washington,
  - b. Have an SUD that might result in addiction, or which already meets diagnostic criteria for addiction
  - c. Be at or below 220% of the Federal Poverty Level (FPL) for income
  - d. Meet criteria for "Hardship Insured or as a "No Insurance" client and be at or below 220% of FPL

The Contractor shall provide SUD treatment coordination and work with case managers or counselors assigned to the offender's case to ensure ongoing support for each individual before and after residential treatment. The Contractor will arrange an admission date and facilitate the means to arrive to the treatment program on the specified date. The Contractor may utilize contract funds for transportation, if needed, but only after all other transportation sources have been exhausted.

#### **IV. Program Requirements**

The Contractor must be licensed by the state of Washington to provide SUD treatment services and must provide certified Chemical Dependency Professionals (CDP) or trainees (CPDTs) with 50 hours of supervised experience to conduct the assessments and treatment coordination. Staff shall have experience working with the incarcerated population and people with complex health/mental issues.

The Contractor will ensure the following elements of this jail assessment and treatment coordination program:

1. Completion of SUD biopsychosocial assessments
2. Determination of financial eligibility
3. Completion of ROIs for referents and other care providers
4. Communication of diagnosis, treatment placement, and final outcomes to necessary referents and others as indicated by the client
5. Arrangement of treatment start dates and admission dates
6. Facilitate transportation means to residential care as needed
7. Provide monthly data reports as indicated below.
8. Services and funding amounts may be changed, based on service use, over the course of the contract year without a contract amendment. Changes must be authorized by the County in writing, at least 30 days prior to the provision of services.

#### **V. Reporting Requirements**

1. The Contractor will submit a monthly Excel report in a form provided by the County to the contract administrator by the 15<sup>th</sup> of each month after the month in which the services were provided. The Contractor shall fill in each area of the form related to each client served and work with the County to ensure all of the pertinent information is included. Due to the confidential information in the spreadsheet, the document must be sent to the Contract Administrator through a secure portal in compliance with HIPAA and 42 CFR Part 2.