

**WHATCOM COUNTY CONTRACT
INFORMATION SHEET**

Whatcom County Contract No.
202304013 – 5

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"/>				

Is this contract the result of a RFP or Bid process?	If yes, RFP and Bid number(s):	Contract Cost Center:	10008602-Dedicated Cannabis / 10008588 & 10007014-Substance Abuse Block Grant / 18538510-Trueblood / 18538502-Jail Services / 18538520-Co-Responder / Naloxone / Substance use Disorder Prof / Recovery Navigator Coordinator
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			

Is this agreement excluded from E-Verify?	No <input type="checkbox"/> Yes <input type="checkbox"/>
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If YES, indicate exclusion(s) below:

<input type="checkbox"/> Professional services agreement for certified/licensed professional.	<input type="checkbox"/> Contract for Commercial off the shelf items (COTS).
<input type="checkbox"/> Contract work is for less than \$100,000.	<input type="checkbox"/> Work related subcontract less than \$25,000.
<input type="checkbox"/> Contract work is for less than 120 days.	<input type="checkbox"/> Public Works - Local Agency/Federally Funded FHWA.
<input type="checkbox"/> Interlocal Agreement (between Governments).	

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:
\$ 2,920,840	
This Amendment Amount:	
\$ 104,295	
Total Amended Amount:	
\$ 3,025,135	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 amendment provides adds various funding through 06/30/2025, adds definitions, and updates insurance requirements.

Term of Contract:	1 year, auto renewals	Expiration Date:	Until terminated
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Contract Routing:	1. Prepared by:	J. Thomson	Date:	12/18/2024
	2. Attorney signoff:	Christopher Quinn	Date:	1/13/2025
	3. AS Finance reviewed:	BBennett	Date:	12/30/2024
	4. IT reviewed (if IT related):		Date:	
	5. Contractor approved:		Date:	
	6. Executive Contract Review:		Date:	
	7. Council approved (if necessary):	AB2025-136	Date:	
	8. Executive signed:		Date:	
	9. Original to Council:		Date:	

**NORTH SOUND BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION, LLC
(NORTH SOUND BH-ASO)
CONTRACT AMENDMENT 5**

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 September 11, 2024, collectively the “Contract”) is hereby amended as follows:

The purpose of this amendment is to provide funding for January 1, 2025 to June 30, 2025 (Dedicated Cannabis Account, Jail Services Program, and Trueblood Programming:

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

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

“Mental Health Care Provider” means an individual working in a Behavioral Health Agency, under the supervision of a Mental Health Professional, who has primary responsibility for implementing an individualized plan for mental health rehabilitation services. To provide services as a Mental Health Care Provider, this person must be a registered agency affiliated counselor and have a minimum of one year education or experience in mental health or related fields.

- **Replace 7.17 Insurance**, which reads “North Sound BH-ASO certifies it is a member of Washington Governmental Risk Pool for all exposure to tort liability, general liability, property damage liability and vehicle liability, if applicable, as provided by RCW 43.19. By the date of execution of this Contract and post 15 days renewal of said contract, the Provider shall procure and maintain insurance for the duration of this Contract, Provider shall carry Commercial General Liability (CGL) Insurance to include coverage for bodily injury, property damage, and contractual liability, with the following minimum limits: Each Occurrence - \$1,000,000; General Aggregate - \$3,000,000; shall include liability arising out of premises, operations, independent contractors, personal injury, advertising injury, and liability assumed under an insured contract. The costs of such insurance shall be paid by the Provider or subcontractor. The Provider may furnish separate certificates of insurance and policy endorsements for each subcontractor as evidence of compliance with the insurance requirements of this Contract. The Provider is responsible for ensuring compliance with all of the insurance requirements stated herein. Failure by the Provider, its agents, employees, officers, subcontractors, providers, and/or provider subcontractors to comply with the insurance requirements stated herein shall constitute a material breach of this Contract. All non-risk pool policies shall name North Sound BH-ASO as a covered entity under said policy(s).” **with the following:**

PROGRAM APPROVAL: _____
Malora Christensen, Response Systems Manager Date

DEPARTMENT HEAD APPROVAL: _____
Erika Lautenbach, Health and Community Services Director Date

APPROVAL AS TO FORM: _____
Christopher Quinn, Chief 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 Services Organization Dedicated Cannabis Account Program Cost Reimbursement Budget Whatcom County Human Services		
Six Month Budget January 1, 2025 to June 30, 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 January 1, 2025 to June 30, 2025		
Revenues		
Jail Services Funding	\$	42,583.19
*One Time Additional (1/1/2025-6/30/2025)	\$	101,896.00
Total	\$	144,479.19
Expenses		
Jail Services	\$	144,479.19
Total	\$	144,479.19
Budget Amount	\$	144,479.19
Expenses		-
Balance	\$	144,479.19

*Less funds already spent

North Sound Behavioral Health Administrative Services Organization Substance Abuse Block Grant CFDA 93.959 Cost Reimbursement Budget Whatcom County Human Services		
Annual Budget July 1, 2024 to June 30, 2025		
Revenues		
SABG	\$	406,228.00
Total	\$	406,228.00
Expenses		
Opiate Outreach Services	\$	406,228.00
Total	\$	406,228.00
Budget Amount	\$	406,228.00
Expenses		-
Balance	\$	406,228.00

North Sound Behavioral Health Administrative Services Organization Trueblood Program Cost Reimbursement Budget Whatcom County Human Services		
Six Month Budget January 1, 2025 to June 30, 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 Co-Responder Cost Reimbursement Budget Whatcom County Human Services		
Annual Budget July 1, 2024 to June 30, 2025		
Revenues		
MHBG Funds	\$	221,486.00
SABG Funds	\$	211,272.00
Total	\$	432,758.00
Expenses		
Co-Responder Expense	\$	432,758.00
Total	\$	432,758.00
Budget Amount	\$	432,758.00
Expenses		-
Balance	\$	432,758.00

North Sound Behavioral Health Administrative Services Organization Naloxone Vending Machine Cost Reimbursement Budget Whatcom County Human Services		
Annual Budget July 1, 2024 to June 30, 2025		
Revenues		
SABG ARPA	\$	50,000.00
Total	\$	50,000.00
Expenses		
Naloxone	\$	50,000.00
Total	\$	50,000.00
Budget Amount	\$	50,000.00
Expenses		-
Balance	\$	50,000.00

North Sound Behavioral Health Administrative Services Organization Substance Use Disorder Professional Cost Reimbursement Budget Whatcom County Human Services		
Annual Budget July 1, 2024 to June 30, 2025		
Revenues		
13b Proviso Funds	\$	100,000.00
Total	\$	100,000.00
Expenses		
SUD Professional	\$	100,000.00
Total	\$	100,000.00
Budget Amount	\$	100,000.00
Expenses		-
Balance	\$	100,000.00

North Sound Behavioral Health Administrative Services Organization Recovery Navigator Coordinator Cost Reimbursement Budget Whatcom County Human Services		
Annual Budget July 1, 2024 to June 30, 2025		
Revenues		
13b Proviso Funds	\$	127,000.00
Total	\$	127,000.00
Expenses		
Recovery Navigator Coordinator	\$	127,000.00
Total	\$	127,000.00
Budget Amount	\$	127,000.00
Expenses		-
Balance	\$	127,000.00