WHATCOM COUNTY							WI	Whatcom County Contract Number:			
CONTRACT INFORMATION SHEET 202308009								J2308009 – 3	3		
Originating Department: 85 Health and Community Services											
Division/Program: (i.e. Dep		Response Systems Division / LEAD									
Contract or Grant Administ		Vanessa Martin									
Contractor's / Agency Name: North Sound Behavioral Health Administrative Services Organization, LLC											
Is this a New Contract?	Contract? If not, is this an Amendment or Renewal to an Existing Contract? Yes ⊠ N							No □			
Yes ☐ No ☑ If Amendment or Renewal, (per WCC 3.08.100 (a)) Original Contract #: 202308009											
Does contract require Co	uncil Approval?	Yes ⊠	s 🖂 No 🖂 If No, include WCC:								
Already approved? Cour		(Exclusions see: Whatcom County Codes					3.06.010, 3.08.090 and 3.08.100)				
Is this a grant agreement? If yes, grantor agreement contract number								t:			
Is this contract grant fund Yes	Is this contract grant funded? Yes □ No □ If yes, Whatcom County grant contract number(s):										
Is this contract the result Yes No No	ss? I number(s				Contract Center:	Cost 18538517					
Is this agreement exclude	•	No ⊵						l			
	•	INO	7 162								
☐ Contract work is for le		icensed professional. Goods and services provided due to Contract for Commercial off the shelf items Work related subcontract less than \$25,000					ems (C0 ,000.	(COTS).			
☐ Interlocal Agreement		☐ Public Works - Local Agency/Federally Funded FHWA.									
Contract Amount:(sum of cany prior amendments): \$ 1,382,910 This Amendment Amount: \$ 256,227.50 Total Amended Amount:		Council approval required for; all property leases, contracts or bid awards exceeding \$4 and professional service contract amendments that have an increase greater than \$10,0 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 capita approved by council in a capital budget appropriation ordinance.							\$10,000 or cil.		
			3. Bid or award is for supplies.								
\$ 1,639,137.50 4. Equipment is included in Exhibit "B" of the Budget Ordinance Contract is for manufacturer's technical support and hardware maintenance of electro systems and/or technical support and software maintenance from the developer of proprietary software currently used by Whatcom County. Summary of Scope: This amendment updates insurance language and increases funding.											
<u> </u>	•	•		IIICIEas							
	ear + automatic renew	<u> </u>	iration Date:		Until Terminated	or superse			07/00/00	10F	
Contract Routing: 1. Preparent		J					Dat		07/03/20		
Z. Allon	ney signoff:		imberly A. Thu	ılin			Dat Dat		07/16/20		
	AS Finance reviewed: 4. IT reviewed (if IT related):			Bbennett				-	07/31/20	120	
	, ,						Dat Dat	-			
Contractor signed: Executive Contract Review:							Dat				
			4 2000 700						1		
7. Council approved (if necessary):			AB2025-580					Date:			
8. Executive signed:							Dat	e:			
9. Origin	nal to Council:						Dat	e:			

NORTH SOUND BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES ORGANIZATION, LLC (NORTH SOUND BH-ASO) CONTRACT AMENDMENT 3

CONTRACT #NORTH SOUND BH-ASO-WHATCOM COUNTY-RNP-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 August 11, 2023, (as amended by North Sound BH-ASO and Provider dated September 16, 2024, collectively the "Contract") is hereby amended as follows:

The purpose of this amendment is to provide funding for July 1, 2025 to December 31, 2025:

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

• 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:

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 - \$2,000,000; General Aggregate - \$4,000,000; 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)."

 Replace Exhibit B(b) - Whatcom County_RNP_Budget with Exhibit B(c) - Whatcom County_RNP_Budget

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

JanRose Ottaway Martin

Executive Director

Date

7/2/25

Satpal Sidhu County Executive Date

PROGRAM APPROVAL:			
Malora (Date		
DEPARTMENT HEAD APPROVAL	· ·		
	Charlene Ramont, Interim Director	Date	
	Whatcom County Health and Community Services		
APPROVAL AS TO FORM: Appro	ved by email KT/JT	07/16/2025	
Kimbe	ly 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 Behavioral Health **Administrative Services Organization Blake Recovery Navigator Cost Reimbursement Budget Whatcom County Human Services** Six Month Budget July 1, 2025 to December 31, 2025 Revenues Blake Navigator Program 256,227.50 256,227.50 Total Expenses Blake Navigator Program Expense \$ 256,227.50 \$ 256,227.50 Total Budget Amount \$ 256,227.50 Expenses \$ Balance 256,227.50