WHATCOM COUNTY							Whatcom County Contract Number:				
CONTR				RACT INFO	NFORMATION SHEET 202406032 – 1					ļ	
Originating Department:					85 Health and Community Services						
Division/Program: (i.e. Dept. Division and Program)					8530 Community Health / 853020 Healthy Children & Families						
Contract or Grant Administrator:					Allison Williams						
Contractor's / Agency Na	ame:				Mobile Mama	Strategies, Inc.			1	1	
Is this a New Contract?					al to an Existing C				Yes ⊠	No 🗆	
Yes □ No ⊠				1,,		Original Contract a	#:		20206032		
Does contract require			Yes ⊠	No □	If No, include	WCC:					
Already approved? Co	ouncil Appro	ved Date:			(Exclusions see: V	Whatcom County Codes	s 3.06.010,	3.08.090	and 3.08.10	<u>))</u>	
Is this a grant agreement?											
Yes □ No ⊠		If yes, g	rantor agency c	ontract nu	mber(s):		ALN#:	ALN#:			
Is this contract grant fu	nded?										
Yes □ No ⊠		If yes, V	/hatcom County	y grant cor	ntract number(s):						
Method of Procuremen	nt:		MRSC Roster	· Solicitatio	n	Contract Cost C	Center:	er: 18581004.6610			
Is this agreement exclu	uded from E	-Verify?	No ⊠	Yes [
If YES, indicate exclusion	n(s) below:										
□ Professional servi		nent for c	ertified/license	d professi	ional. 🔲 God	ods and services pr	rovided d	ue to ar	n emergen	су.	
☐ Contract work is for	r less than \$	100,000.			☐ Contract for Commercial off the shelf items (COTS).						
☐ Contract work is for					☐ Work related subcontract less than \$25,000.						
☐ Interlocal Agreeme	nt (between	Governn	nents).	☐ Public Works - Local Agency/Federally Funded FHWA.							
Contract Amount:(sum of original contract amount and any				Council approval required for; all property leases, contracts or bid awards exceeding							
prior amendments):				\$40,000, and professional service contract amendments that have an increase greater							
\$ 164,235				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.							
This Amendment Amount:				2. Contract is for design, construction, r-o-w acquisition, prof. services, or other capital							
\$ 133,100				costs approved by council in a capital budget appropriation ordinance.							
Total Amended Amount:				Bid or award is for supplies.							
\$ 297,335				 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.					10111 410						
Summary of Scope: This	s amendme	nt increas	es the number	of interns f	rom three to five.						
Contract Term Ends:	07/31/202	6									
	1. Prepare	d by:		J. Tho	mson		Da	te:	04/01/20	25	
Contract Routing:	2. Health Budget Approval			PL/CR	PL/CR		Da	te:	04/28/20	025	
	3. Attorney			Christo	pher Quinn		Da	te:	04/28/20	ງ25	
	4. AS Fina			bbenne	ett		Da		4/30/20	25	
	5. IT review	<u> </u>					Da				
	6. Contract			Initia	<u> </u>		Da	0			
	7. Executiv	e Contract	: Keview:	l H			Da	te:	5/14/2	025	
			if necessary):	AB202	5-354		Da		05/14/20	025	
	9. Executiv	e signed:					Da	te:	5/14/2	025	
	10. Origina	l to Counc	il:				Da	te:			

WHATCOM COUNTY Health and Community Services



Charlene Ramont, MPH, Interim Director Amy Harley, MD, MPH, Co-Health Officer Meghan Lelonek, MD, Co-Health Officer

Memorandum

TO: Satpal Sidhu, County Executive

FROM: Charlene Ramont, Interim Director

RE: Mobile Mama Strategies, Inc. – Mental Health Workforce Expansion Pilot Program Contract

Amendment #1

DATE: MAY 14, 2025

Attached is a contract amendment between Whatcom County and Mobile Mama Strategies, Inc. for your review and signature. This amendment increases the number of interns in the program from three to five.

Background and Purpose

This contract supports Strategy 7 of the Healthy Children's Fund to recruit a mental and behavioral health workforce to Whatcom County. The Contractor administers an internship pilot project that will increase access to perinatal mental health care and concurrently develop a local mental health workforce skilled in addressing perinatal mood and anxiety disorders for Medicaid enrollees and other low-income persons. Up to five interns will provide perinatal mental health services to Medicaid and other low-income eligible persons during the course of the internships.

The Contractor will build the local mental health system's capacity to serve perinatal parents by recruiting, supervising, and mentoring interns enrolled in a graduate program that trains mental health therapists and clinical social workers who want to become licensed.

Funding Amount and Source

This amendment increases funding by \$133,100. Funding for this contract, in an amount not to exceed \$297,335, is provided by the Healthy Children's Fund. These funds are included in the 2025 budget. Council authorization is required as the funding provided by this amendment exceeds 10% of the amount authorized by Council.

Differences from Previous Contracts

Section	Differences
Exhibit A – Scope of Work	 Increases the number of interns from three to five Adds duties performed by the Internship Coordinator Updates the estimated timeline
Exhibit B – Compensation	 Increases funding to support five interns Increases estimated costs to align with current costs/rates

Please contact Sarah Simpson, Child and Family Programs Supervisor at 360-778-6176 (SSimpson@co.whatcom.wa.us) if you have any questions.

Encl.



Whatcom County Contract Number: 202406032 – 1

WHATCOM COUNTY CONTRACT AMENDMENT MENTAL HEALTH WORKFORCE EXPANSION

PARTIES:

Whatcom County
Whatcom County Health and Community Services
509 Girard Street
Bellingham, WA 98225

AND CONTRACTOR: Mobile Mama Strategies, Inc. 214 N Commercial Street, Suite 102 Bellingham, WA 98225

CONTRACT PERIODS:

Original: 07/01/2024 – 07/31/2026 Amendment #1: 04/30/2025 – 07/31/2026

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. Amend Exhibit A Scope of Work, to remove references to the number of interns selected and add duties performed by the Internship Coordinator.
- 2. Amend Exhibit B Compensation, to increase funding to support five interns and increase estimated costs to align with current rates/costs. Increased costs are indicated for the following:
 - Intern Group Coordination the number of hours for these services has increased due to the addition of
 the facilitation of the monthly internship seminar and the supervision of the intern-facilitated Tender
 Transitions group, which necessitates a greater number of hours of direct meetings with interns, both as
 a group and individually.
 - Programmatic Admin Duties these costs have increased due to the increased number of hours necessary for coordination with higher education institutions, the increased number of applications to review, and the increased number of intern interviews.
 - Lifespan Integration Training from \$430 to \$460
 - Perinatal Support WA Training from \$350 to \$375
- 3. Funding for the total contract period (07/01/2024 07/31/2026) is not to exceed \$297,335.
- 4. All other terms and conditions remain unchanged.
- 5. The effective start date of the amendment is 04/30/2025.

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. Each signatory below to this Contract warrants that he/she is the authorized agent of the respective party; and that he/she has the authority to enter into the contract and bind the party thereto.

DocuSigned	by:		
APPROVAL AS TO PROGRAM: Unit Bu	de	5/14/2025	
Ann Beck, Co	ommunity Health and Human Services Manager	Date	
	by: Llene Ramont	5/14/2025	
DEPARTMENT HEAD APPROVAL: Charlenge	Ramont, Interim Director	 Date	
	County Health and Community Services	Date	
Signed by:	County Health and Community Services		
APPROVAL AS TO FORM: Christopher	Christopher Quinn		
	n, Chief Civil Deputy Prosecutor	Date	
FOR THE CONTRACTOR: Signed by: Midulle lunderson B456378743E2489.	Michelle Anderson, LMHC - Owner	5/14/2025 	
Contractor Signature	Printed Name and Title	Date	
FOR WHATCOM COUNTY: Docusigned by: Satpal Single Sidle 5/14/2	2025		
Satpal Singh Sidhu, County Executive	Date		

CONTRACTOR INFORMATION:

Mobile Mama Strategies, Inc. 214 N Commercial Street, Suite 102 Bellingham, WA 98225 michelle@mobilemama.com

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

I. Background and Purpose

This contract supports Strategy 7 of the Healthy Children's Fund Implementation Plan to recruit a mental and behavioral health workforce to Whatcom County. The Contractor will administer an internship pilot project that aims to directly increase access to perinatal mental health care, and concurrently develop a local mental health workforce skilled in addressing perinatal mood and anxiety disorders for Medicaid enrollees and other low-income persons. This project will build local capacity of the mental health system to serve perinatal parents by recruiting, supervising, and mentoring interns enrolled in a graduate program that is training mental health therapists and clinical social workers seeking to become licensed. The interns will provide perinatal mental health services to Medicaid and other low-income persons during the course of the internships.

Perinatal mental health symptoms are common and can affect any individual, regardless of their background. Perinatal mental health services include identifying, referring and treating mood changes that occur during pregnancy and the transition to parenthood that don't resolve on their own, worsen in severity, and affect a person's quality of life. According to SAMHSA's MHTTC Network, "the spectrum of perinatal mental health conditions includes perinatal depression; perinatal anxiety and panic disorders; obsessive-compulsive disorder (OCD); post-traumatic stress disorder (PTSD); perinatal bipolar disorder and postpartum mania; postpartum psychosis; perinatal substance use; parental suicide; and complicated grief after perinatal loss". For the purposes of this contract, services include intake assessment, counseling, and referrals to collaborative healthcare partners. An overview of the internship objectives and training can be found in Exhibit D.

Whatcom County Health and Community Services recognizes the significant need for accessible and effective mental health care for expectant parents, new families and young children. Perinatal depression, the most common U.S. obstetric complication, significantly harms child and family well-being. Left untreated, it increases costly birth complications, weakens family support systems, and has lasting negative impacts on both parent's and children's physical and mental health. These consequences can include poor interpersonal relationships, increased risk of child abuse and neglect, developmental delays, and increased healthcare costs. Addressing perinatal mental health concerns can help children develop secure attachments and support their development and health through the life course. This contract assists in addressing these critical gaps in Whatcom County.

On average, the Contractor sees about 90 clients per week, with 61% of clients enrolled in Medicaid. This highlights the immense need for accessible perinatal mental health services within this vulnerable population. The internship program directly addresses this disparity. Interns exclusively serve Medicaid-eligible clients, significantly expanding access to care for those who often face significant barriers.

The program emphasizes rigorous training and supervision in perinatal mental health, ensuring interns are equipped to provide culturally sensitive and trauma-informed support. The program incorporates training that deepens intern understanding of the societal risk factors that increase trauma prevalence in marginalized groups. By offering parents timely intervention, the program aims to improve their mental health outcomes, helping them develop coping mechanisms, strengthen support symptoms, and ultimately foster the well-being of both parents and children.

II. Statement of Work

The Contractor will administer a mental health internship pilot program that prepares interns with the knowledge, skills, and confidence to continue their work with perinatal clients, post-graduation and provide Whatcom County families with much-needed support. Internship objectives include:

- Providing professional training and supervision for pre-licensed graduate students who have educational backgrounds in applied psychology (counseling, clinical or social work).
- Continuing the intern's development of knowledge and skills, in the provision of individual therapy, as they work with at minimum 10-12 clients per week.
- Providing training focused on therapeutic methods and therapies specific to the perinatal population grounded in trauma informed care and evidence-based research.

• Supporting Whatcom County by increasing the number of perinatal clients that can receive counseling and increasing the number of trained perinatal mental health providers.

Selection of interns involves the following steps:

- a. Applicants submit letters of interest and resumes.
- b. Initial 30-minute interviews are conducted to assess the applicant's interest in perinatal mental health, their educational theoretical orientation and that of their program, and their hopes of the internship.
- c. A second round of interviews is held for applicants who seem motivated to work in their perinatal field and can work with clients in Whatcom County. This step aims to develop a better understanding of their experience, education and commitment.
 - 1. Interns are expected to counsel clients form different cultural backgrounds than themselves, promoting cultural competency.
 - 2. The Contractor considers applicants' ability to make clients feel safe, seen and understood across differences.
- d. A third interview is conducted to determine the applicants who will be excellent additions to the Contractor's team.
- e. References for the top applicants are contacted.
- f. Applicants who demonstrate the ability to support perinatal clients with a trauma-informed, gentle and non-judgmental approach are invited to become interns and integral team members.

The Contractor will provide extensive training, as follows:

- a. Interns will receive training on:
 - Intake and assessment:
 - 2. Mobile Mama Method of working with the perinatal population
 - 3. Documentation, Treatment Planning, Diagnoses
 - 4. Crisis and Emergency Procedures
 - 5. Perinatal Support Washington (PSWA) Perinatal Mood and Anxiety Disorders (PMADs) Training including the following topics:
 - a. The adjustment to motherhood
 - b. Perinatal Depression
 - c. Perinatal Anxiety and OCD
 - d. Perinatal Bipolar and Psychosis
 - e. Understanding Traumatic Birth
 - f. Understanding Perinatal Loss
 - g. Supporting Parents During and After the NICU
 - h. Understanding Psychopharmacological Treatments of PMADs for Non-prescribers
 - Breastfeeding ad the Perinatal Period
 - j. Sexual Abuse Implications during the Perinatal Period
- b. Interns will take a Level One Lifespan Integration Training (at no cost to the intern).
- c. Interns will have the opportunity to join the Perinatal Mental Health Peer Consult.
- d. Interns will have the opportunity to participate in the Whatcom County Perinatal Mental Health Task Force.
- e. Interns will participate in group supervision, up to four times per month.

A. The Contractor (Michelle Anderson) will:

- 1. Provide at least one hour of supervision to interns per week with a trained perinatal mental health counseling supervisor.
- Supervise live, co-counsel, or watch/listen to some recorded client sessions each quarter.
- 3. Inform the University Internship Coordinator of any concerns regarding the student or placement.
- 4. As much as possible, involve the student with the activities assigned to regular staff members (e.g., administrative meetings, workshops, case management, etc.).
- 5. Provide the student with the opportunity for individual counseling and at least one other treatment modality including assessment and intakes.
- 6. Provide office space and all necessary supplies and materials to carry out the assigned duties.
- 7. Orient the student to the services provided by the agency, required recordkeeping and paperwork, the standard operating procedures of the agency, and referral sources. The Contractor will also provide training for electronic medical records, case notes and other necessary documentation.
- 8. Provide interns with emergency and crisis training.
- 9. Invite interns to participate in additional clinically relevant training, when possible.
- 10. Provide an optional survey to intern's clients at the completion of each internship to evaluate the client's care from the intern.
- 11. Provide an exit interview to each intern at the completion of each internship as an opportunity for further development of the internship program and for the intern to share their experiences of each part of the internship including interviews, onboarding, training, consultation and supervision, documentation, team experience, and transition.
- 12. Complete a formal evaluation of the intern at the end of each quarter and share the contents of the evaluation with the intern.
- 13. Provide the opportunity for supervised experience in the use of assessment tools and exposure to research literature.
- 14. Make recommendations to the Clinical Mental Health Counselor (CMHC) program (via the University Internship Coordinator) concerning needed curricular and programmatic changes.

B. The Internship Coordinator will:

- 1. Facilitate the monthly, one-hour Internship Seminar where important topics will be presented and discussed with the entire intern cohort. The Internship Seminar is an opportunity for the interns to meet in-person, following up on their extensive training about specific processes and topics, from skill-building to components of a clinical practice.
 - a. The Internship Coordinator will prepare the curriculum for each Seminar, debrief with the Contractor after each Seminar, and follow up on specific intern questions.
- 2. Meet with the Contractor for Supervision of Supervision (SOS). SOS is the process where a clinical supervisor seeks support and guidance from a more experienced supervisor. It provides additional support and reflection for the supervising clinician's practice.
- 3. Meet with each intern individually for at least one hour per month to provide support.
- 4. Co-counsels interns in the Mobile Mama Tender Transitions group.
 - a. Co-counseling is defined as a licensed therapist and intern jointly providing therapy and is a common practice in counseling internships. Licensed therapists provide guidance and support to interns as they participate in therapy sessions, helping the intern develop their clinical skills to provide counseling independently.

b. Tender Transitions is a 90-minute group that provides an opportunity for participants to receive more immediate support in a group setting. Tender Transitions runs for six (6) to eight (8) weeks and is held several times per year, following a specific curriculum created by the Internship Coordinator. Participants are people who are a) referred in, or b) an appropriate fit for Mobile Mama but on the waitlist for a Therapist.

C. The Intern will:

- 1. Participate in the pilot project for 20 hours per week, for the 600 minimum total hours required, which includes 240 hours of direct service to clients (described in 2., below).
- 2. Provide the required 240 direct service hours to clients.
 - a. Direct service is defined (CACREP 2016 Standards) as "supervised use of counseling, consultation, or related professional skills with actual clients (can be individuals, couples, families, or groups) for the purpose of fostering social, cognitive, behavioral, and/or affective change. These activities must involve interaction with others and may include: 1) assessment; 2) counseling; 3) psycho-educational activities; and 4) consultation. The following would not be considered direct service: 1) observing others providing counseling or related services; 2) record keeping; 3) administrative duties; and 4) clinical and/or administrative supervision."
- 3. Provide ongoing individual counseling with a variety of clients starting with 10-12 clients per week. Interns exclusively serve Medicaid-eligible clients, significantly expanding access to care for those who often face significant barriers. Over the course of the internship, interns may see up to 18 unique clients depending on the frequency of counseling appointments and client terminations. The goal is to provide medium- to long-term counseling for each client.
- 4. Provide services to clients through individual counseling and at least one other treatment modality (e.g., couples, family, group, assessment, intakes). The course of care is determined by individual clients and the interns under the supervision of Michelle Anderson, LMHC. Typically, clients receive therapy weekly or biweekly for six months to two years. Each person will receive the following after being referred for services:
 - a. Intake to assess for presenting concern, insurance, risk factors, suicidal ideation, domestic violence, substance use, preference for telehealth or office visit, and schedule availability.
 - b. Referral to a Mobile Mama therapist, placement on the waitlist, referral to a community provider or organization, and/or a warm handoff to the PSWA Warmline.
 - c. If the referred person becomes a client, they complete an intake and screening and receive therapy services. If waitlisted, they may be offered group therapy until a counselor becomes available.
- 5. Participate in weekly individual supervision meetings.
- 6. Participate in monthly Internship Seminars (described in II.B.1., above).
- 7. Meet monthly with the Internship Coordinator for support, for at least one hour.
- 8. Co-counsel with the Internship Coordinator in the Mobile Mama Tender Transitions Group and eventually co-lead the Group.
- 9. Participate in a minimum of one ongoing counseling experience with a client who is culturally different from the student (e.g., gender identity, SES, race/ethnicity, etc. from themselves).
- 10. Attend staffing, group consultations, case presentations and other meetings that coincide with the internship schedule and as requested by the site supervisor.
- 11. Complete appropriate paperwork in a timely manner and comply with personnel policies and procedures of the internship site.
- 12. Participate in the assessment of counseling progress and effectiveness of counseling interventions through the use of data collection.

- 13. Participate in the assessment counseling progress and effectiveness of interventions with at least one ongoing client or group. Interns should collect data on progress and outcomes and utilize the data to improve counselor effectiveness. This process should typically begin by winter quarter at the latest.
- 14. Maintain an activity log for all internship hours.
 - a. In order to verify the number of completed internship hours, the intern must keep a daily log of all related activities. These logs not only provide a record of the student's experience, but they also establish the importance of accountability and provide a mechanism for keeping data that the student can carry into work experience after graduation. A summary of the activity log must be provided to their University's Internship Coordinator at the end of each quarter to verify that the student is making satisfactory progress toward the 240 direct service hours and 600 total hours.
- 15. Receive a stipend from the Contractor of \$1,600 per 80 hours/month of service. Weekly this includes 10-12 clinical hours, intakes, ongoing training, documentation, supervision, group supervision, peer consult.

III. Reporting Requirements

In a format approved by the County, the Contractor will submit the following data for each internship program cycle on the 15th of the month, following the completion of each quarter (October 15, January 15, April 15, July 15):

- a. The number of clients receiving intakes, referrals and counseling.
- b. Demographics (if reported these are optional for clients and include gender identity, marital status, employment status, race and ethnicity), Medicaid status and number of counseling hours received for each client.
- c. Screening scores for clients pre- and post-mental health treatment, as demonstrated using a validated assessment tool (e.g., EPDS, GAD).
- d. Client surveys on their care experience.
- e. Exit interviews with interns about the program.

IV. Estimated Timeline:

August 2024	Initiate onboarding and training of the first intern					
September 2024	Intern begin intakes and referrals					
October 2024	 Provide quarterly update about the internship program Interns begin co-facilitating a 7-week psycho-education Mobile Mama Strategies group for mothers with low acuity concerns 					
November 2024 – June 2025	Interns build caseloads up to 10-12 clients per week and maintain this caseload through the duration of the internship program.					
December 2024	Contractor starts contacting universities for the 2025-2026 cohort					
January 2025	 Provide quarterly update about the internship program Initiate onboarding and training of the second intern 					
February 2025	Second intern begins intakes and referrals					
March 2025	Second intern builds caseload up to 10-12 clients and maintains this caseload through the duration of the internship program					
April 2025	Provide quarterly updates about the internship program					
June 2025	 Post-treatment screenings (EPDS, GAD) for clients on intern 1 Provide post-evaluation for each client of intern 1 regarding their experience from initial contact with Mobile Mama, including onboarding, intake, therapy, and closure of services 					
July 2025	Provide quarterly update about the internship program					
August 2025	Initiate onboarding and training of the fourth cohort (3rd, 4th and 5th interns)					
September 2025	Interns begin intakes and referrals					
October 2025	Provide quarterly update about the internship program					
November 2025	 Interns in cohort 4 build caseload up to 10-12 clients and maintain this caseload through the duration of the internship program Post-treatment screenings (EPDS, GAD) for clients of intern 2 Provide post-evaluation for each client of intern 2 regarding their experience from initial contact with Mobile Mama, including onboarding, intake, therapy, and closure of services 					
December 2025	Contractor starts contacting universities for the 2026-2027 cohort					
January 2026	Provide quarterly update about the internship program					
April 2026	Provide quarterly update about the internship program					
June 2026	 Post-treatment screenings (EPDS, GAD) for clients on interns in cohort 4 Provide post-evaluation for each client of interns in cohort 4 regarding their experience from initial contact with Mobile Mama, including onboarding, intake, therapy, and closure of services 					
July 2026	Create a report providing an overview of cumulative data regarding the internship program					
	4					

EXHIBIT "B" - Amendment #1 (COMPENSATION)

<u>Budget and Source of Funding</u>: The source of funding for this contract, in an amount not to exceed \$297,335, is provided by the Healthy Children's Fund. The budget for this contract is based on how many interns participate in the program. Contractor will indicate current number of interns on each invoice. The budget is as follows:

			2024-20	25 Cohort	202	25-2026 Coh	ort	
Cost ****Cost Description		Documents Required with	*Budget/ 1 Intern	*Budget/ 2 Interns	*Budget/ 1 Intern	*Budget/ 2 Interns	*Budget/ 3 Interns	
		Each Invoice	Total/11 Months					
1	Intern stipend	Expanded GL Detail documenting stipends paid	\$17,600	\$35,200	\$17,600	\$35,200	\$52,800	
2**	Michelle Anderson (Clinical Supervision and Ongoing or Initial Training) @ \$150/hour Estimated at 10-11 hours/intern Intern Group Coordination, Oversight and Initial Training @ \$50/hour Estimated at 15 hours/intern	Dates/hours of service and brief description of activities performed. If training, title of training provided and position title of trainer	\$23,100	\$46,200	\$29,980	\$59,960	\$89,940	
	Programmatic admin duties @ \$150/hour (Michelle Anderson) or \$50/hour (Internship Coordinator) Estimated at 10-11 hours/intern	Dates/hours of service and brief description of activities performed + name of intern services are performed for and copies of receipts or paid invoices for external fees						
3	Taxes ~10% Fiscal/L&l/unemployment	Expanded GL Detail	\$2,255	\$4,510	\$2,255	\$4,510	\$6,765	
4	Advertising (Social Media, Newsletter, Website)	Copies of receipts or paid invoice(s)	\$550	\$1,100	\$550	\$1,100	\$1,650	
5	Simple Practice (EMR/Telehealth)	Expanded GL Detail	\$660	\$1,320	\$660	\$1,320	\$1,980	
6	Insurance		\$660	\$1,320	\$660	\$1,320	\$1,980	
7	Office internet		\$550	\$1,100	\$550	\$1,100	\$1,650	
8	Cellular work phone		\$440	\$880	\$440	\$880	\$1,320	
9	Office space (includes parking space)		\$7,150	\$14,300	\$8,085	\$16,170	\$24,255	
10***	Onboarding fees	Copies of paid invoices or receipts	\$1,000	\$2,000	\$1,000	\$2,000	\$3,000	
11	PSWA 10-week training	Copy of paid invoice(s)	\$350	\$700	\$375	\$750	\$1,125	
12	Lifespan Integration Training	.,	\$430	\$860	\$460	\$920	\$1,380	
INTERNSHIP TOTAL			\$54,745	\$109,490	\$62,615	\$125,230	\$187,845	
				Total not to exceed – Total not to exceed – \$109,490 \$187,845			ed –	
TOTAL CONTRACT NOT TO EXCEED:					\$297,335			

^{*} These are estimated budgets, not to exceed the amounts specified

^{** 2.} Programmatic Admin Duties include university site communications, intern interviews, reference checks. Initial training includes EMR, Emergency/Crisis Procedures, Intakes, Mobile Mama Method.

- *** 10. Onboarding fees include photographer costs for intern photoshoots, website costs for addition of interns to the website, newsletter editing and design costs to inform subscribers of new interns, initial work phone set-up costs for each intern, and accounting costs to ensure that grant fees are accounted for and distributed.
- **** Hourly rates may not increase during the contract period 07/01/2024 07/31/2026.

Contractor's Invoicing Contact Information:				
Name	Michelle Anderson			
Phone	360-393-5114			
Email	michelle@mobilemama.com			

Refer to Exhibits B.1 and B.2 for additional invoicing requirements and information.

EXHIBIT "B.1" – Invoicing – General Requirements

- 1. When applicable, the contractor may transfer funds among budget line items. Line item changes that exceed 10% must be pre-approved by the County Contract Administrator, prior to invoicing.
- 2. When applicable, indirect costs and fringe benefit cost rates may not exceed the amount indicated in Exhibit B or the Contractor's federally approved indirect cost rate.
- 3. The Contractor shall submit invoices indicating the County-assigned contract number to: HL-BusinessOffice@co.whatcom.wa.us and AWilliam@co.whatcom.wa.us
- 4. The Contractor shall submit itemized invoices on a monthly basis in a format approved by the County and by the 15th of the month, following the month of service, except for January and July where the same is due by the 10th of the month.
- 5. When applicable, the Contractor will utilize grant funding sources in the order of their expiration date as indicated by the County, prior to spending local funding sources, when no funding restrictions prevent doing so.
- 6. The contractor shall submit the required invoice documentation identified in Exhibit B.
 - a. The County reserves the right to request additional documentation in order to determine eligible costs. Additional documentation must be received within 10 business days of the County's request.
 - b. When applicable, if GL reports for personnel reimbursement do not specify position titles, additional documentation must be provided that includes staff name and position title.
 - c. When applicable, mileage will be reimbursed at the current GSA rate (<u>www.gsa.gov</u>). Reimbursement requests for mileage must include:
 - 1. Name of staff member
 - 2. Date of travel
 - 3. Starting address (including zip code) and ending address (including zip code)
 - 4. Number of miles traveled
 - d. When applicable, travel and/or training expenses will be reimbursed as follows:
 - Lodging and meal costs for training are not to exceed the current GSA rate (<u>www.gsa.gov</u>), specific to location.
 - 2. Ground transportation, coach airfare and ferries will be reimbursed at cost when accompanied by receipts.
 - 3. Reimbursement requests for allowable travel and/or training must include:
 - a. Name of staff member
 - b. Dates of travel
 - c. Starting point and destination
 - d. Brief description of purpose
 - e. Receipts for registration fees or other documentation of professional training expenses.
 - f. Receipts for meals are not required.
- 7. Payment by the County will be considered timely if it is made within 30 days of the receipt and acceptance of billing information from the Contractor.
- 8. The County may withhold payment of an invoice if the Contractor submits it or the required invoice documentation, more than 30 days after the month of services performed and/or the expiration of this contract.
- 9. Invoices must include the following statement, with an authorized signature and date: I certify that the materials have been furnished, the services rendered, or the labor performed as described on this invoice.
- 10. Duplication of billed costs or payments for service: The Contractor shall not bill the County for services performed or provided under this contract, and the County shall not pay the Contractor, if the Contractor has been or will be paid by any other source, including grants, for those costs used to perform or provide the services in this contract. The Contractor is responsible for any audit exceptions or disallowed amounts paid as a result of this contract.

EXHIBIT "B.2" – Invoice Preparation Checklist for Vendors

	County intends to pay you promptly. Below is a checklist to ensure your payment will be processed quickly. ide this to the best person in your company for ensuring invoice quality control.
	Send the invoices to the correct address:
	HL-BusinessOffice@co.whatcom.wa.us and AWilliam@co.whatcom.wa.us
	Submit invoices monthly, or as otherwise indicated in your contract.
<u>Verif</u>	y that:
	invoices include the following statement, with an authorized signature and date: I certify that the materials have been furnished, the services rendered, or the labor performed as described on this invoice.
	the time period for services performed is clearly stated and within the contract term beginning and end dates. Also verify any other dates identified in the contract, such as annual funding allocations;
	invoice items have not been previously billed or paid, given the time period for which services were performed
	enough money remains on the contract and any amendments to pay the invoice;
	the invoice is organized by task and budget line item as shown in Exhibit B;
	the Overhead or Indirect Rate costs match the most current approved rate sheet;
	the direct charges on the invoice are allowable by contract. Eliminate unallowable costs.
	personnel named are explicitly allowed for within the contract and the Labor Rates match the most current approved rate sheet;
	back-up documentation matches what is required as stated in Exhibit B and B.1;
	contract number is referenced on the invoice;
	any pre-authorizations or relevant communication with the County Contract Administrator is included; and
	Check the math.
\//ba	toom County will not roimburgo for:

Whatcom County will not reimburse for:

- Alcohol or tobacco products;
- Traveling Business or First Class; or
- Indirect expenses exceeding 10% except as approved in an indirect or overhead rate agreement.